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1997 Health Care Survey of **DoD Beneficiaries:**

Summary Report on Catchment Areas for Region 7/8

July 1998

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Executive Summary

The Health Care Survey of DoD Beneficiaries (HCSDB) is designed to answer the following five questions:

- How satisfied are DoD beneficiaries with their health care?
- How accessible is health care at military and civilian facilities?
- How knowledgeable are beneficiaries about TRICARE and TRICARE Prime, and what are the sources of information about TRICARE?
- What health care services do beneficiaries use, and what are the sources of those services?
- How much, and what types of, preventive health care do beneficiaries use?

Conducted annually since 1995 and sponsored by the Office of the Assistant Secretary of Defense (Health Affairs) [OASD(HA)], the survey is conducted under the authority of the National Defense Authorization Act for Fiscal Year 1993 (P.L. 102-484). This report presents the key findings of the 1997 HCSDB for adults for catchment areas in Region 7/8. The findings are summarized below.

Satisfaction

- In Region 7/8, CTF patients (82 percent) were more likely than MTF patients (57 percent) to be satisfied with their care. Satisfaction with CTF care is greater than satisfaction with MTF care in every Region 7/8 catchment area.
- The percentage of patients satisfied with MTF care is lowest (42 to 44 percent) at Fort Huachuca, Fort Riley, and Hill AFB, and highest (65 to 70 percent) at Offutt AFB, Ellsworth AFB, Luke AFB, and Fort Leonard Wood. The civilian benchmark for satisfaction with health care is 89 percent, according to the 1997 Household Survey developed by the Center for Studying Health System Change.
- The proportion of enrollees who are satisfied with TRICARE Prime (44 percent) is less than the proportion of patients who are satisfied with MTF care in general (57 percent). This result also applies to each of the individual catchment areas in Region 7/8. The percentage of enrollees satisfied with TRICARE Prime is lowest (32 to 33 percent) at Hill AFB and Fort Huachuca. Satisfaction is highest (52 to 55 percent) at Minot AFB, Whiteman AFB, and Malmstrom AFB Clinic.
- In Region 7/8, satisfaction with civilian care (80 to 83 percent) is greater than satisfaction with military care (55 to 60 percent) among every type of beneficiary. This result also applies to most of the individual catchment areas in Region 7/8.
- Of the beneficiaries in Region 7/8 who reported being enrolled in TRICARE Prime, most (56 to 70 percent) plan to re-enroll in the next 12 months. Of those not enrolled in TRICARE Prime, those under age 65 (13 percent) are more likely than those over age 65 (3 percent) to enroll. These region-wide patterns also apply to most of the individual catchment areas in Region 7/8.
- In Region 7/8, TRICARE Prime enrollees who have a military PCM are just as likely to be satisfied with their care (45 percent) as those with a civilian PCM. Among enrollees with a military PCM, satisfaction is lowest (32 to 33 percent) at Hill AFB and Fort Huachuca, and highest (55 to 57 percent) at Nellis AFB, Luke AFB, Whiteman AFB, and Malmstrom AFB Clinic.

Access to Care

■ Of the beneficiaries in Region 7/8 who used an ER in the past 12 months TRICARE Prime enrollees (21 to 25 percent) were more likely than non-enrollees (16 to 17 percent) to report using the ER because they could not get an appointment with their usual health care provider.

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The percentage of active duty enrollees who used an ER because they could not get a regular appointment is lowest (9 to 13 percent) at Fort Riley, Offutt AFB, and F.E. Warren AFB. The percentage is highest (34 to 38 percent) at Hill AFB, Fort Leonard Wood, Mountain Home AFB, and Ellsworth AFB.

- In Region 7/8, very few patients (6 to 12 percent) wait more than 30 days for a routine care appointment, regardless of TRICARE Prime enrollment status or source of care. In most catchment areas, fewer than 10 percent of TRICARE Prime enrollees waited over 30 days for an appointment at either a MTF or a CTF.
- In Region 7/8, MTF patients (26 to 33 percent) are more likely than CTF patients (14 to 15 percent) to wait more than 30 minutes to see a provider. The TRICARE standard for office waiting periods is 30 minutes. MTF patients in Region 7/8 were most likely to experience long office waits at Fort Carson, Fort Bliss, and Fort Riley.
- In Region 7/8, the most frequently cited reasons for not receiving care at a military facility are the distance to a MTF (37 percent), the difficulty of making appointments at a MTF (30 percent), and the higher quality of care at civilian facilities (21 percent). At Buckley AFB, the most common reason is the closing of the MTF usually used by the beneficiary (73 percent). For people outside of a catchment area, distance is the most common barrier to MTF use (65 percent).

Knowledge of TRICARE

- Thirty percent of beneficiaries in Region 7/8 reported having no knowledge of TRICARE. The percentage of beneficiaries with no knowledge of TRICARE is lowest (14 percent) at Whiteman AFB and Malmstrom AFB Clinic. The percentage is highest (36 to 45 percent) at Kirtland AFB, Luke AFB and outside of Region 7/8 catchment areas.
- In Region 7/8, retirees, survivors, and their family members age 65 or over (47 percent) were more likely than other types of beneficiaries (23 to 36 percent) to have unclear information about enrolling in TRICARE Prime. The percentage of active duty personnel with unclear information about enrolling in TRICARE Prime is highest (39 to 42 percent) at Fort Leonard Wood, Ellsworth AFB, and outside of Region 7/8 catchment areas.
- Beneficiaries in Region 7/8 most frequently cited the following as sources of information about TRICARE: information packages mailed to beneficiaries (64 percent), a TRICARE presentation (36 percent), and a military base newspaper (33 percent). Other commonly cited sources of information in some catchment areas are friends and neighbors and a visit to the TRICARE service center.

Source of Care

- In Region 7/8, 8 percent of active duty beneficiaries used a military pharmacy to fill a prescription written by a civilian provider. The same is true for 21 percent of active duty family members and 29 to 46 percent of retirees, survivors, and family members. The percentage of active duty beneficiaries using a military pharmacy to fill a civilian prescription is highest (23 percent) at Fort Huachuca, and lowest (3 to 4 percent) at Fort Carson, Mountain Home AFB, and Fort Leonard Wood.
- In Region 7/8, 90 percent of active duty personnel use a MTF for their regular source of care, as do 77 percent of active duty family members. In contrast, this is true for only 29 percent of retirees under age 65, and 12 percent of retirees age 65 or over. The majority of these beneficiaries use a CTF instead. This pattern also appears in most catchment areas in Region 7/8.

Use of Care

■ In the 12 months preceding the survey, TRICARE Prime enrollees in Region 7/8 who used MTFs were more likely to have six or more outpatient visits (32 percent) than those who used CTFs (26 percent). In contrast, among non-enrollees, MTF patients (16 percent) were less likely than CTF patients (48 percent) to have six or more outpatient visits. The percentage of

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MTF enrollees with six or more outpatient visits was highest (37 to 39 percent) at Fort Huachuca, Fort Riley, Fort Leonard Wood, Malmstrom AFB Clinic, Kirtland AFB, and Ellsworth AFB. The percentage was lowest (22 to 25 percent) at Buckley AFB Clinic, Grand Forks AFB, Fort Leavenworth, and outside of Region 7/8 catchment areas.

■ The percentage of MTF enrollees with no outpatient visits was highest (17 to 23 percent) at Luke AFB, Buckley AFB Clinic, and outside of Region 7/8 catchment areas. The percentage was lowest (2 to 4 percent) at Nellis AFB, Fort Leavenworth, Malmstrom AFB Clinic, and Grand Forks AFB.

Preventive Care

- Nearly all MHS beneficiaries (95 to 97 percent) had a blood pressure screening in the past two years, as did 95 to 97 percent of beneficiaries in Region 7/8. All of these results exceed the civilian Healthy People 2000 goal of 90 percent. In nearly all catchment areas in Region 7/8, at least 90 percent of each type of beneficiary had a blood pressure screening in the past two years.
- In Region 7/8, non-active duty beneficiaries enrolled in TRICARE Prime (70 percent) were the least likely to have had a cholesterol screening in the past five years, while non-enrollees age 65 or over (93 percent) were the most likely. The Healthy People 2000 goal for adults is 75 percent. The percentage of active duty enrollees who had a cholesterol screening in the past five years is lowest (60 to 61 percent) at Fort Leonard Wood, Minot AFB, and Holloman AFB. The percentage is highest (87 to 91 percent) at Fort Carson, Fort Leavenworth, and Fort Bliss.
- In Region 7/8, 82 percent of female beneficiaries age 50 or over had a breast cancer screening in the past two years. The percentage who had a breast cancer screening is lowest (73 percent) at Fort Leonard Wood and Whiteman AFB, and highest (90 to 93 percent) at Minot AFB and USAF Academy Hospital. All of these results exceed the Healthy People 2000 goal of 60 percent and the civilian benchmark of 56 percent.
- In Region 7/8, female beneficiaries who were enrolled in TRICARE Prime (92 to 94 percent) were more likely than their non-enrolled counterparts (79 to 85 percent) to have had a Pap smear in the past three years. All of these results exceed the Healthy People 2000 goal for adults (75 percent) and the civilian benchmark of 56 percent.
- Ninety-two percent of the female beneficiaries in Region 7/8 who were pregnant at some point during the year preceding the survey received prenatal care during the first trimester. This result exceeds the Healthy People 2000 goal of 90 percent and the 76 to 84 percent observed in the civilian sector.
- In Region 7/8, between 66 and 85 percent of male beneficiaries age 50 or over had a prostate screening in the past two years. The American Cancer Society recommends an annual prostate exam for men age 50 or over.

Enrollment and Beneficiary Health Status

- Of the beneficiaries in Region 7/8 who reported knowing at least a little about TRICARE, 53 percent are enrolled in TRICARE Prime. The level of enrollment in TRICARE Prime is lowest (21 to 46 percent) at Fort Leavenworth, Buckley AFB Clinic, and outside of Region 7/8 catchment areas. The level of enrollment is highest (75 to 82 percent) at Minot AFB, Cannon AFB, and Mountain Home AFB.
- In Region 7/8, between 45 and 57 percent of beneficiaries have a composite physical health score below the age-adjusted median score for the U.S. population. The result of 45 percent among active duty beneficiaries indicates that this group is somewhat healthier than civilians of the same age. Active duty enrollees at Fort Huachuca, Fort Bliss, and F.E. Warren AFB are less healthy than the average active duty enrollee in Region 7/8. In contrast, active duty enrollees at USAF Academy Hospital, Fort Leavenworth, Grand Forks AFB, Ellsworth AFB, and those outside of catchment areas are healthier than the average active duty enrollee.

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Chapter

Introduction

The Health Care Survey of DoD Beneficiaries (HCSDB) is a survey of a large, randomly selected and representative sample of U.S. Department of Defense (DoD) health care beneficiaries. Conducted annually since 1995 and sponsored by the Office of the Assistant Secretary of Defense (Health Affairs) [OASD(HA)], the survey is conducted under the authority of the National Defense Authorization Act for Fiscal Year 1993 (P.L. 102-484).

This document is one of a series of reports on the 1997 HCSDB. This chapter outlines the basic framework of the survey, how to use its findings, and findings of note.

Research Questions

The HCSDB is designed to answer the following five questions:

- How satisfied are DoD beneficiaries with their health care?
- How accessible is health care at military and civilian facilities?
- How knowledgeable are beneficiaries about TRICARE and TRICARE Prime, and what are the sources of information about TRICARE?
- What health care services do beneficiaries use, and what are the sources of those services?
- How much, and what types of, preventive health care do beneficiaries use?

This report presents the key findings of the 1997 HCSDB for adults for catchment areas in Region 7/8. Lead Agents are encouraged to share the findings with their staff members and each officer responsible for a catchment area in their region. The report is designed to provide relevant information to Lead Agents and medical treatment facility (MTF) commanders to inform their management of issues affecting the military health care system and its facilities.

Reports in the Series

This report is the second in a series of three companion reports for Region 7/8, which include the following:

- The 1997 Health Care Survey of DoD Beneficiaries: Key Findings for Region 7/8. This report summarizes the key findings for the region. Together with complementary reports on the other 12 TRICARE regions, it serves as an executive summary of the entire study. Each of the 13 reports provides a brief overview of the purpose, background, and methodology of the survey; suggestions on how to use the survey findings; and data exhibits and summaries of findings for each of the five principal research questions listed on page 1.
- The 1997 Health Care Survey of DoD Beneficiaries: Summary Report on Catchment Areas for Region 7/8. This report presents key survey results for each catchment area in the region. The report also contains an executive summary of the purpose and methodology of the survey.
- The 1997 Health Care Survey of DoD Beneficiaries: Technical Regional Report for Region 7/8. This report has three functions. First, it presents a complete and detailed documentation of the survey methodology and is to be used as a reference. Second, it presents a complete set of survey results for the region. Third, it presents key survey results for each catchment area in the region.

Background

Title VII, Subtitle C, of the National Defense Authorization Act for Fiscal Year 1993 directs the U.S. Secretary of Defense to conduct an annual survey of DoD beneficiaries to assess their knowledge and use of the military health care system (MHS) as well as their satisfaction with the system's accessibility and quality of care. In 1993, DoD assigned responsibility for the survey to OASD(HA), which designed the survey in 1994 and sponsored its administration in 1995, 1996, and 1997. Following the 1995 and 1996 surveys, OASD(HA) provided a regional report on the survey findings to each Lead Agent.

In the summer of 1997, OASD(HA) sponsored a re-evaluation of these regional reports. United HealthCare performed the assessment, interviewing several Lead Agents and their staff members and making recommendations to OASD(HA) for future reports. The reports in this 1997 series are based on those recommendations.

How to Interpret the Survey Findings

Focusing on the research questions underlying the HCSDB is the best way to understand and make use of the survey findings. Those questions, outlined on page 1, reflect two sets of variables.

The first set of variables comprises the *outcome* (or dependent) *variables*. These include answers to survey questions on beneficiaries' satisfaction with their health care, barriers to accessing care, knowledge of TRICARE, use of health care and preventive services, and sources of health care.

The second set of variables comprises the *explanatory* (or independent) *variables*, which may help explain differences in one or more of the outcome variables listed above. Exhibit 2.1 in Chapter 2, for example, presents findings on beneficiaries who reported being satisfied with their health care in each catchment area in Region 7/8. The exhibit addresses the question: "How does the satisfaction of beneficiaries (the outcome variable) differ across catchment areas (the explanatory variables)?" In other words, does the location of beneficiaries in a particular catchment area appear to affect their level of satisfaction?

Throughout the regional and catchment area reports in this series, all exhibits display the outcome variable on the vertical axis (the Y-axis) and the explanatory variables on the horizontal axis (the X-axis). For example, in Exhibit 2.1, the height of a given bar represents the average percentage of beneficiaries who reported being satisfied with their health care in the catchment area indicated on the horizontal axis.

It is important to recognize that the results of any survey are not strictly precise. The statistics presented in this report are *estimates* of the true answers to the research questions, both because the survey is based on a sample, rather than on a census of the entire population in the Defense Enrollment Eligibility Reporting System (DEERS), and because some of the people surveyed chose not to respond. The survey design does, however, allow us to evaluate how precise the estimates are.

The margin of error for estimates based on all beneficiaries or all patients in Region 7/8 is about 1 percentage point. The margin of error for estimates based on TRICARE Prime enrollees in Region 7/8 is about 2 percentage points. The margin of error for estimates based on all beneficiaries or patients in a single catchment area is roughly 3 to 6 percentage points. Estimates based on smaller subgroups, such as pregnant women, may be considerably less precise. The *Technical Report on Region 7/8* in this series presents a more detailed discussion of these issues, such as standard errors, weighting of the completed questionnaire, and adjusting the data to account for nonrespondents.

Methodology

In September 1997, the Defense Manpower Data Center (DMDC) drew a random sample of DoD beneficiaries from the DEERS database that is representative of all persons in the system as of July 14, 1997. DEERS includes all persons eligible for a MHS benefit: personnel activated for more than 30 days in the Army, Air Force, Navy, Marine Corps, Coast Guard, Commissioned Corps of the Public Health Service, National Oceanic and Atmospheric Administration, and National Guard or Reserve, as well as other special categories of people who qualify for health benefits. DEERS covers active duty personnel and their families as well as retirees and their family members.

In November and December 1997, Data Recognition Corporation mailed the survey questionnaire to 156,388 adults and 30,253 parents of sampled beneficiaries under age 18. Of the adult questionnaires, 78,857 were completed and returned by the due date of March 31, 1998, for a response rate of 50.8 percent. Of the child questionnaires, 14,293 were completed and returned by the due date, for a response rate of 47.4 percent.

Both the adult questionnaire (Form A) and the child questionnaire (Form C) include a variety of survey questions designed to answer the five research questions listed on page 1, although the child questionnaire covers them in somewhat less detail. The Form A survey questionnaire may be found in Appendix E of the Technical Regional Report.

The sample for Region 7/8 included 25,169 adults and 2,558 parents of sampled children. Of the adults, 13,378 returned completed questionnaires by the due date, for a response rate of 54.1 percent; 1,255 parents of sampled children did the same, for a response rate of 49.3 percent.

To ensure that the survey results would be representative of the DEERS population, Mathematica Policy Research, Inc. (MPR) adjusted the data to reflect the characteristics of the initial sample and to correct for the sampled individuals who chose not to respond to the survey. The data in this report are therefore estimated to be representative of the population of persons eligible for military health care in Region 7/8. The survey methodology and analysis are described in detail in "The 1997 Health Care Survey of DoD Beneficiaries (HCSDB): Technical Manual".

The HCSDB in Context with Other Data Sources

The HCSDB, one of several DoD health surveys, is unique in that it provides information that is unavailable from any other DoD health survey. Specifically, the HCSDB is the only survey covering the topics listed on page 1 for *all* DoD beneficiaries. The other DoD health surveys represent only a portion of the beneficiary population. Thus, the HCSDB is the only source of information on these topics for the entire population a Lead Agent or a MTF commander is charged with.

The following summary shows how the HCSDB differs from other DoD data sources:

- Health Enrollment Assessment Review (HEAR). The health status findings of the HCSDB are not comparable to those of the HEAR because the surveys represent different populations. The HCSDB represents all MHS beneficiaries as of a single date, July 14, 1997, and their survey responses between December 1997 and March 1998 (for the 1997 HCSDB). In contrast, the HEAR represents those who enrolled in TRICARE during the previous year; the results are considered a part of the patient's medical record as a managed care tool, and are seldom accessible for making generalizations.
 - New enrollees do not, in general, have the same health status or other characteristics as the population of all beneficiaries. For example, new enrollees are younger, on average, than other beneficiaries, and their health status is therefore different from that of older beneficiaries.
- MTF Customer Satisfaction Survey. The HCSDB results on satisfaction are not comparable to the results of the Customer Satisfaction Survey, again because the two surveys represent different populations. The HCSDB results represent the satisfaction of all DoD beneficiaries regardless of the source of care, whereas the Customer Satisfaction Survey results represent the satisfaction of patients, that is, those who visit a MTF or other military clinic. Moreover, the Customer Satisfaction Survey queries its sample members immediately following the person's visits to the MTF or clinic and asks about that specific visit. The results will be significantly different if an individual is generalizing their satisfaction over an extended period, as in the HCSDB, as compared to focusing on a specific visit.
- Survey of Health-Related Behaviors among Military Personnel (SHRBMP). The preventive care results of the HCSDB are not comparable to those of the SHRBMP because the two surveys represent different populations. While the HCSDB results represent the preventive care of all DoD beneficiaries, the SHRBMP results represents only active duty personnel. The SHRBMP focuses on specific behaviors that put the active duty member or his family at risk of illness or injury. Further, the HCSDB is annual, while the SHRBMP is fielded once every 18 months to three years.
- MHS Performance Report Card. Although several performance measures in the MHS Performance Report Card appear to be the same as certain HSCDB measures, comparing the findings of these two surveys is not meaningful for two reasons. First, the Report Card represents an individual MTF, while the HSCDB represents all beneficiaries in a geographic area such as a region or a catchment area. Second, the Report Card presents secondary data; that is, it reconfigures data from other sources of health care information. Specifically, performance measures that appear to be the same as ones in the HSCDB are, in fact, based on HSCDB data. Other performance measures are based on MTF Customer Satisfaction Survey data or on Standardized Inpatient Data Records.

The Findings in Context with a National Civilian Benchmark

Exhibit 2.1 in the next chapter compares the percentage of DoD beneficiaries who are satisfied with their health care with a national benchmark of civilian satisfaction. The national civilian benchmark is based on the 1997 Household Survey conducted by the Center for Studying Health System Change in Washington, D.C. The Center is a not-for-profit research organization funded by the Robert Wood Johnson Foundation in Princeton, New Jersey. The Household Survey collected data on satisfaction with health care in 1997 from approximately 1,300 families in 60 sites nationally. Satisfaction measures included overall health care, choice of providers, technical quality of care received at last visit, and provider-patient communication.

Preventive Care Standards

Chapter 7 examines the use of preventive care, such as routine physicals and mammography. Beneficiaries' actual use of preventive care is compared to civilian standards, which represent desired goals of preventive care use in the civilian sector. Beneficiaries' actual use of preventive care is also compared to civilian benchmarks, which represent actual preventive care use among civilians.

Most of the civilian standards are based on Healthy People 2000 preventive care goals. The American Cancer Society guideline is used for prostate screening because no standard is given in Healthy People 2000. Civilian benchmarks are based on data published by the National Center for Quality Assurance and the National Center for Health Statistics.

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Chapter 2

Satisfaction with TRICARE and TRICARE Prime

This chapter is designed to answer the question, "How satisfied are (DoD) beneficiaries with their health care?" The HCSDB measures satisfaction by asking beneficiaries to rate their military care overall, their civilian care overall, and specific aspects of each type of care using a 5-point scale. For most of the questions, the scale ranges from excellent to poor. For a few questions, the beneficiary is asked whether or not he or she agrees with a statement about health care. The scale for those questions ranges from strongly agree to strongly disagree.

The key findings about satisfaction are presented below. A Performance Improvement Plan for each catchment area in Region 7/8, based on these findings, is included in Chapter 9.

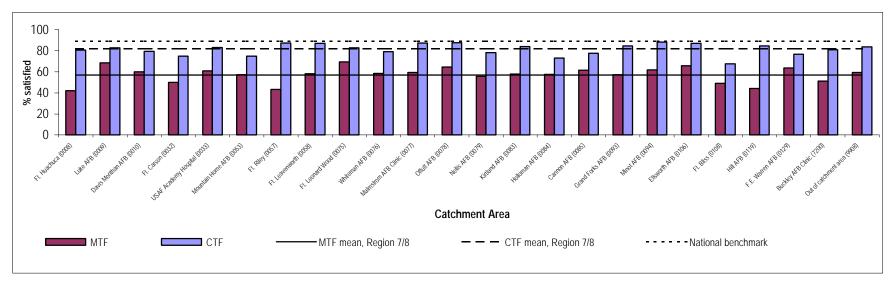
All Beneficiaries Who Received Care in the Past 12 Months

- In Region 7/8, CTF patients (82 percent) were more likely than MTF patients (57 percent) to be satisfied with their care. Satisfaction with CTF care is greater than satisfaction with MTF care in every Region 7/8 catchment area.
- The percentage of patients satisfied with MTF care is lowest (42 to 44 percent) at Fort Huachuca, Fort Riley, and Hill AFB, and highest (65 to 70 percent) at Offutt AFB, Ellsworth AFB, Luke AFB, and Fort Leonard Wood. The civilian benchmark for satisfaction with health care is 89 percent, according to the 1997 Household Survey developed by the Center for Studying Health System Change.
- The proportion of enrollees who are satisfied with TRICARE Prime (44 percent) is less than the proportion of patients who are satisfied with MTF care in general (57 percent). This result also applies to each of the individual catchment areas in Region 7/8. The percentage of enrollees satisfied with TRICARE Prime is lowest (32 to 33 percent) at Hill AFB and Fort Huachuca. Satisfaction is highest (52 to 55 percent) at Minot AFB, Whiteman AFB, and Malmstrom AFB Clinic.
- In Region 7/8, satisfaction with civilian care (80 to 83 percent) is greater than satisfaction with military care (55 to 60 percent) among every type of beneficiary. This result also applies to most of the individual catchment areas in Region 7/8.

Enrolled Beneficiaries

- Of the beneficiaries in Region 7/8 who reported being enrolled in TRICARE Prime, most (56 to 70 percent) plan to re-enroll in the next 12 months. Of those not enrolled in TRICARE Prime, those under age 65 (13 percent) are more likely than those over age 65 (3 percent) to enroll. These region-wide patterns also apply to most of the individual catchment areas in Region 7/8.
- In Region 7/8, TRICARE Prime enrollees who have a military PCM are just as likely to be satisfied with their care (45 percent) as those with a civilian PCM. Among enrollees with a military PCM, satisfaction is lowest (32 to 33 percent) at Hill AFB and Fort Huachuca, and highest (55 to 57 percent) at Nellis AFB, Luke AFB, Whiteman AFB, and Malmstrom AFB Clinic.

2.1 Patients Satisfied with the Care They Received at a Military (MTF) or Civilian (CTF) Treatment Facility, by Catchment Area and Compared to a National Civilian Benchmark



Population:

Patients who received some care at a MTF or CTF or both during the 12 months preceding their survey response

Sample size: 12,334

Vertical axis:

The percent of the sample who "strongly agree" or "agree" they are satisfied with the care they received

Survey questions: 51a and 66a

What the exhibit shows:

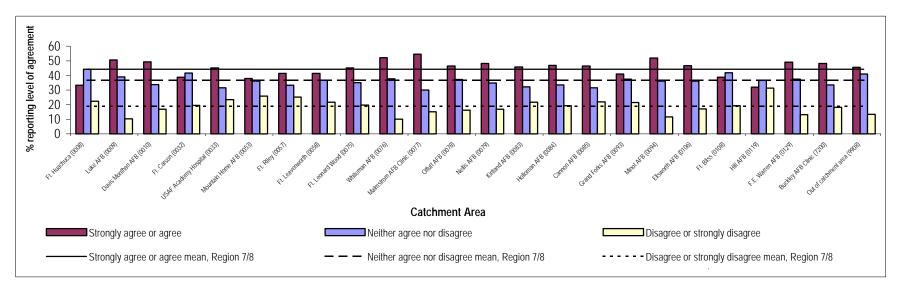
- How satisfaction with care varies across catchment areas in Region 7/8
- How satisfaction at MTFs compares to that at CTFs
- How MHS satisfaction rates compare to a national benchmark for civilians' satisfaction

Findings:

Beneficiaries who received some care at a MTF or CTF or both during the 12 months preceding the survey are referred to as patients throughout this report. In Region 7/8, CTF patients (82 percent) were more likely than MTF patients (57 percent) to be satisfied with their care. The civilian benchmark for satisfaction with health care is 89 percent, according to the 1997 Household Survey developed by the Center for Studying Health System Change.

Satisfaction with CTF care is greater than satisfaction with MTF care in every Region 7/8 catchment area. The percentage of patients satisfied with MTF care is lowest (42 to 44 percent) at Fort Huachuca, Fort Riley, and Hill AFB, and highest (65 to 70 percent) at Offutt AFB, Ellsworth AFB, Luke AFB, and Fort Leonard Wood. The percentage of patients satisfied with CTF care is lowest (68 percent) at Fort Bliss, and highest (88 percent) at Offutt AFB and Minot AFB.

2.2 TRICARE Prime Enrollees' Levels of Satisfaction with TRICARE Prime, by Catchment Area



Population:

Beneficiaries enrolled in TRICARE Prime, including both those who received care in the 12 months preceding their survey response and those who did not

Sample size: 5,236

Vertical axis:

The percent of the sample reporting a given level of satisfaction

Survey question: 82a

What the exhibit shows:

- How satisfied TRICARE Prime enrollees are with the care they receive
- How satisfaction levels vary across catchment areas

Findings:

Forty-four percent of the TRICARE Prime enrollees in Region 7/8 reported being satisfied with the care they received, while 19 percent reported being dissatisfied. The proportion of enrollees who are satisfied with TRICARE Prime (44 percent) is less than the proportion of patients who are satisfied with MTF care in general (57 percent). This result also applies to each of the individual catchment areas in Region 7/8.

The percentage of enrollees satisfied with TRICARE Prime is lowest (32 to 33 percent) at Hill AFB and Fort Huachuca. Satisfaction is highest (52 to 55 percent) at Minot AFB, Whiteman AFB, and Malmstrom AFB Clinic.

2.3 Percent of Patients Satisfied with the Military or Civilian Care They Received in Each Catchment Area, by Type of Beneficiary

		Type of Beneficiary							
Catchment Area	Population	Active Duty Personnel		Active Duty Family Members		Retirees, Survivors, and Family Under Age 65		Retirees, Survivors, and Family Age 65 or Over	
		MTF	CTF	MTF	CTF	MTF	CTF	MTF	CTF
Ft. Huachuca (0008)	17,645	35.0	80.1	34.3	78.4	53.7	79.2	54.0	86.2
Luke AFB (0009)	55,668	60.6	71.2	67.0	84.2	76.5	80.0	63.8	87.1
Davis Monthan AFB (0010)	32,848	58.0	100.0	57.5	77.3	68.8	72.9	40.9	85.5
Ft. Carson (0032)	42,358	39.4	74.9	50.1	63.0	59.0	77.9	65.4	77.8
USAF Academy Hosp (0033)	45,176	57.1	81.3	62.0	76.5	62.1	84.9	69.0	83.2
Mountain Home AFB (0053)	8,398	59.2	59.6	51.5	69.2	61.4	82.0	65.5	84.3
Ft. Riley (0057)	22,676	39.4	91.9	40.0	82.7	51.7	89.4	63.4	84.4
Ft. Leavenworth (0058)	28,682	65.9	97.0	59.1	85.8	47.7	83.3	57.7	87.7
Ft. Leonard Wood (0075)	22,930	72.6	85.1	53.8	81.6	74.4	83.7	65.7	78.4
Whiteman AFB (0076)	9,534	59.3	71.7	64.2	83.4	53.4	77.2	47.7	83.4
Malmstrom AFB Clinic (0077)	9,471	62.8	80.5	67.7	88.5	48.1	88.4	45.4	92.4
Offutt AFB (0078)	31,813	62.0	66.7	62.8	93.4	66.8	89.2	74.1	87.7
Nellis AFB (0079)	43,673	63.0	57.3	57.2	64.9	55.4	84.5	44.6	69.3
Kirtland AFB (0083)	28,903	63.8	81.4	44.5	67.8	64.8	83.4	47.9	89.4
Holloman AFB (0084)	10,627	56.0	69.4	54.4	70.3	63.9	76.1	48.6	70.8
Cannon AFB (0085)	8,291	54.4	70.4	65.8	81.1	70.0	80.1	68.2	71.7
Grand Forks AFB (0093)	8,055	53.1	83.3	62.4	78.3	60.4	91.0	48.1	81.8
Minot AFB (0094)	8,392	62.9	75.0	53.3	91.5	76.4	93.6	60.5	85.9
Ellsworth AFB (0106)	10,054	68.4	86.6	54.6	80.5	68.6	88.4	76.3	91.6
Ft. Bliss (0108)	42,213	48.1	75.8	52.3	64.7	41.4	63.0	61.7	74.3
Hill AFB (0119)	24,115	42.4	83.0	49.0	77.1	42.2	85.5	45.7	86.3
F.E. Warren AFB (0129)	9,659	69.7	51.7	60.0	70.3	58.1	85.0	58.7	87.4
Buckley AFB Clinic (7200)	33,112	56.3	73.0	51.1	82.0	42.6	79.6	59.0	83.9
Out/Area-Reg 8 (9908)	192,658	55.3	87.5	53.8	85.9	60.0	82.8	63.9	83.9
Region 7/8 Overall	746,950	55.3	81.6	54.6	79.5	59.2	81.8	59.9	83.4
MHS Average	5,539,478	57.1	74.4	55.8	80.6	61.5	83.3	63.1	85.1

Population:

Patients who received some care at a MTF or CTF or both during the 12 months preceding their survey response

Sample size: 12,334

Survey questions: 51a and 66a

What the exhibit shows:

- Whether some patients are more satisfied with their care than others
- Whether satisfaction varies by type of facility
- How findings vary across catchment areas

Findings:

Satisfaction with civilian care in Region 7/8 is greater than satisfaction with military care among every type of beneficiary. Between 55 and 60 percent of beneficiaries are satisfied with MTF care, compared with 80 to 83 percent who are satisfied with CTF care. Active duty personnel and their family members are generally less satisfied with MTF care than are retirees, survivors, and their family members.

In most catchment areas in Region 7/8, satisfaction with CTF care is greater than satisfaction with MTF care among every type of beneficiary. Note that in many catchment areas, the sample of active duty CTF patients is too small to yield accurate estimates of satisfaction.

2.4a Percent of Beneficiaries Likely to Enroll or Re-enroll in TRICARE Prime in Each Catchment Area, by Enrollment Status

		Enrollment Status				
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over	
Ft. Huachuca (0008)	15,739	57.5	68.6	5.9	3.1	
Luke AFB (0009)	36,493	57.8	65.0	15.8	3.8	
Davis Monthan AFB (0010)	26,383	62.7	71.6	8.5	0.0	
Ft. Carson (0032)	36,883	63.2	70.3	19.0	1.5	
USAF Academy Hosp (0033)	38,321	60.4	75.8	10.7	3.3	
Mountain Home AFB (0053)	8,030	71.7	70.6	6.7	0.0	
Ft. Riley (0057)	17,833	50.3	80.9	10.5	2.3	
Ft. Leavenworth (0058)	21,524	51.3	76.1	11.3	1.8	
Ft. Leonard Wood (0075)	18,986	52.1	74.1	16.2	0.0	
Whiteman AFB (0076)	8,794	60.9	79.1	22.1	2.0	
Malmstrom AFB Clinic (0077)	8,509	66.1	65.1	3.5	1.7	
Offutt AFB (0078)	28,425	54.4	74.9	5.2	0.0	
Nellis AFB (0079)	31,480	63.1	71.7	19.4	2.0	
Kirtland AFB (0083)	19,309	59.0	67.2	16.2	4.6	
Holloman AFB (0084)	9,941	61.8	81.9	16.6	0.0	
Cannon AFB (0085)	7,819	60.4	72.1	16.8	1.4	
Grand Forks AFB (0093)	7,351	63.8	72.8	16.9	0.0	
Minot AFB (0094)	7,980	69.1	84.6	8.8	0.0	
Ellsworth AFB (0106)	8,916	76.9	77.1	11.6	8.3	
Ft. Bliss (0108)	35,434	54.9	63.9	19.2	0.0	
Hill AFB (0119)	17,325	52.6	65.6	11.5	1.9	
F.E. Warren AFB (0129)	8,498	59.8	79.0	8.7	1.5	
Buckley AFB Clinic (7200)	22,464	59.5	72.4	13.3	4.7	
Out/Area-Reg 8 (9908)	112,982	27.5	47.2	12.7	5.6	
Region 7/8 Overall	555,419	55.8	69.5	13.0	3.3	
MHS Average	3,803,675	51.4	69.4	16.8	4.5	

Population:

Beneficiaries reporting knowing at least a little about TRICARE

Sample size: 9,364 Survey question: 83

What the exhibit shows:

- Whether beneficiaries are likely to enroll or re-enroll in TRICARE Prime
- How that likelihood varies by enrollment status and type of enrollee
- How findings vary across catchment areas

Findings:

Of the beneficiaries in Region 7/8 who reported being enrolled in TRICARE Prime, most plan to re-enroll in the next 12 months, including 56 percent of active duty enrollees and 70 percent of non-active duty enrollees. Of the beneficiaries who were not enrolled in TRICARE Prime but reported knowing at least a little about TRICARE, those under age 65 (13 percent) were more likely than those age 65 or over (3 percent) to enroll in the next 12 months.

These region-wide patterns also apply to most of the individual catchment areas in Region 7/8 -- enrollees are likely to re-enroll and non-enrollees, particularly older ones, are unlikely to enroll. Only outside of Region 7/8 catchment areas do fewer than half of active duty enrollees (28 percent) plan to re-enroll. The percentage of active-duty enrollees who plan to re-enroll is highest (72 to 77 percent) at Mountain Home AFB and Ellsworth AFB.

2.4b Percent of Beneficiaries Unlikely to Enroll or Re-enroll in TRICARE Prime in Each Catchment Area, by Enrollment Status

		Enrollment Status					
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over		
Ft. Huachuca (0008)	15,739	23.5	17.0	82.0	81.2		
Luke AFB (0009)	36,493	17.6	21.4	61.5	74.1		
Davis Monthan AFB (0010)	26,383	17.8	16.7	80.3	90.2		
Ft. Carson (0032)	36,883	17.2	12.7	64.9	85.8		
USAF Academy Hosp (0033)	38,321	16.8	16.8	74.8	85.9		
Mountain Home AFB (0053)	8,030	12.6	15.8	81.8	91.8		
Ft. Riley (0057)	17,833	23.9	13.6	73.8	79.3		
Ft. Leavenworth (0058)	21,524	32.6	18.4	72.6	81.0		
Ft. Leonard Wood (0075)	18,986	24.5	14.8	62.1	88.4		
Whiteman AFB (0076)	8,794	16.5	13.3	58.8	92.0		
Malmstrom AFB Clinic (0077)	8,509	15.8	13.1	74.0	87.1		
Offutt AFB (0078)	28,425	23.0	12.4	77.6	86.7		
Nellis AFB (0079)	31,480	17.1	16.2	56.4	70.9		
Kirtland AFB (0083)	19,309	18.3	14.8	68.5	88.4		
Holloman AFB (0084)	9,941	14.2	10.5	63.5	90.0		
Cannon AFB (0085)	7,819	18.3	14.1	65.0	82.5		
Grand Forks AFB (0093)	7,351	14.3	12.1	62.2	80.6		
Minot AFB (0094)	7,980	14.0	8.0	81.9	89.9		
Ellsworth AFB (0106)	8,916	12.5	14.6	64.4	83.3		
Ft. Bliss (0108)	35,434	20.8	16.6	60.0	86.4		
Hill AFB (0119)	17,325	24.3	12.1	69.9	86.9		
F.E. Warren AFB (0129)	8,498	16.1	10.4	69.6	86.7		
Buckley AFB Clinic (7200)	22,464	20.1	16.2	59.2	77.8		
Out/Area-Reg 8 (9908)	112,982	35.6	28.4	58.6	79.6		
Region 7/8 Overall	555,419	21.3	16.5	64.4	81.6		
MHS Average	3,803,675	25.4	17.2	58.6	77.6		

Population:

Beneficiaries reporting knowing at least a little about TRICARE

Sample size: 9,364
Survey question: 83
What the exhibit shows:

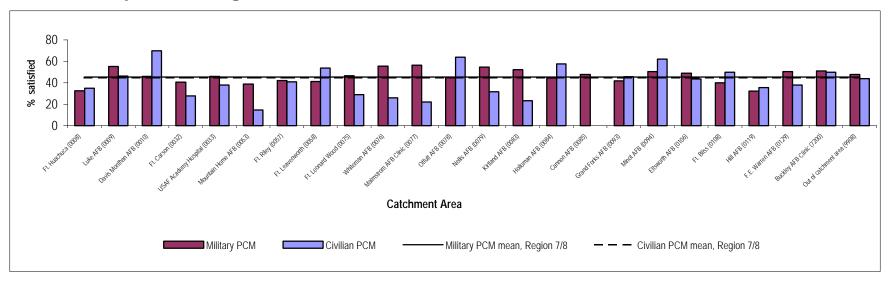
- Whether beneficiaries are likely to enroll or reenroll in TRICARE Prime
- How that likelihood varies by enrollment status and type of enrollee
- How findings vary across catchment areas

Findings:

Of the active duty beneficiaries in Region 7/8 who reported being enrolled in TRICARE Prime, 21 percent do not plan to re-enroll in the next 12 months. This result is surprising, as active duty personnel are required to enroll in TRICARE Prime.

The percentage of active duty enrollees who do not plan to re-enroll is highest (33 to 36 percent) at Fort Leavenworth and outside of Region 7/8 catchment areas. The percentage is lowest (13 to 14 percent) at Mountain Home AFB, Ellsworth AFB, Holloman AFB, Grand Forks AFB, and Minot AFB.

2.5 TRICARE Prime Enrollees Satisfied with Their Care in Each Catchment Area, by Type of Primary Care Manager



Population:

Beneficiaries enrolled in TRICARE Prime

Sample size: 6,150

Vertical axis:

The percent of the sample reporting they either "strongly agree" or "agree" they are satisfied with the health care they receive under TRICARE Prime

Survey questions: 79 and 82a

What the exhibit shows:

- Whether enrollees' satisfaction with TRICARE Prime varies by type of PCM
- · How findings vary across catchment areas

Findings:

In Region 7/8, TRICARE Prime enrollees who have a military PCM are just as likely to be satisfied with their care (45 percent) as those with a civilian PCM.

Among enrollees with a military PCM, satisfaction is lowest (32 to 33 percent) at Hill AFB and Fort Huachuca, and highest (55 to 57 percent) at Nellis AFB, Luke AFB, Whiteman AFB, and Malmstrom AFB Clinic. The sample of enrollees with a civilian PCM is too small to yield accurate estimates of satisfaction.

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Chapter 3

Access to Health Care

This chapter is designed to address the question, "How accessible is health care at military and civilian facilities to DoD beneficiaries?" Indicators of accessibility include:

- The number of beneficiaries who used an emergency room in lieu of their usual source of care because the facility they typically use was not available
- The number of days between calling to make an appointment and the appointment itself
- The length of office waits
- The reasons beneficiaries choose not to use military care are furnished to indicate areas for improvement.

The key findings are:

- Of the beneficiaries in Region 7/8 who used an ER in the past 12 months TRICARE Prime enrollees (21 to 25 percent) were more likely than non-enrollees (16 to 17 percent) to report using the ER because they could not get an appointment with their usual health care provider. The percentage of active duty enrollees who used an ER because they could not get a regular appointment is lowest (9 to 13 percent) at Fort Riley, Offutt AFB, and F.E. Warren AFB. The percentage is highest (34 to 38 percent) at Hill AFB, Fort Leonard Wood, Mountain Home AFB, and Ellsworth AFB.
- In Region 7/8, very few patients (6 to 12 percent) wait more than 30 days for a routine care appointment, regardless of TRICARE Prime enrollment status or source of care. In most catchment areas, fewer than 10 percent of TRICARE Prime enrollees waited over 30 days for an appointment at either a MTF or a CTF.
- In Region 7/8, MTF patients (26 to 33 percent) are more likely than CTF patients (14 to 15 percent) to wait more than 30 minutes to see a provider. The TRICARE standard for office waiting periods is 30 minutes. MTF patients in Region 7/8 were most likely to experience long office waits at Fort Carson, Fort Bliss, and Fort Riley.
- In Region 7/8, the most frequently cited reasons for not receiving care at a military facility are the distance to a MTF (37 percent), the difficulty of making appointments at a MTF (30 percent), and the higher quality of care at civilian facilities (21 percent). At Buckley AFB, the most common reason is the closing of the MTF usually used by the beneficiary (73 percent). For people outside of a catchment area, distance is the most common barrier to MTF use (65 percent).

3.1 Percent of Beneficiaries Who Used an Emergency Room in Lieu of a Regular Appointment in Each Catchment Area, by Enrollment Status

		Enrollment Status					
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over		
Ft. Huachuca (0008)	8,242	23.2	33.7	16.0	14.4		
Luke AFB (0009)	23,763	17.5	17.7	10.5	23.6		
Davis Monthan AFB (0010)	14,105	19.3	30.3	23.9	14.6		
Ft. Carson (0032)	21,765	19.6	36.7	21.5	10.3		
USAF Academy Hosp (0033)	20,583	19.8	25.3	22.9	18.0		
Mountain Home AFB (0053)	4,716	35.7	39.7	24.7	22.7		
Ft. Riley (0057)	11,577	8.8	31.0	27.9	22.2		
Ft. Leavenworth (0058)	11,662	21.8	24.0	15.2	11.0		
Ft. Leonard Wood (0075)	12,176	35.4	28.1	25.3	20.1		
Whiteman AFB (0076)	3,693	20.8	22.5	11.9	7.7		
Malmstrom AFB Clinic (0077)	3,589	16.3	20.4	23.4	16.9		
Offutt AFB (0078)	13,611	10.9	18.6	5.0	13.6		
Nellis AFB (0079)	19,391	25.2	29.8	15.2	24.7		
Kirtland AFB (0083)	12,282	14.1	29.7	21.7	11.3		
Holloman AFB (0084)	5,116	20.5	36.0	31.5	26.5		
Cannon AFB (0085)	3,434	25.8	24.7	22.4	22.5		
Grand Forks AFB (0093)	2,684	22.2	26.9	23.8	20.5		
Minot AFB (0094)	4,324	23.7	31.1	21.3	20.2		
Ellsworth AFB (0106)	4,437	37.9	24.9	16.4	9.1		
Ft. Bliss (0108)	24,022	15.7	20.3	29.3	25.7		
Hill AFB (0119)	10,341	34.0	23.8	15.3	12.1		
F.E. Warren AFB (0129)	4,225	13.2	10.0	33.1	14.5		
Buckley AFB Clinic (7200)	14,548	26.4	17.8	16.2	16.1		
Out/Area-Reg 8 (9908)	80,039	15.9	15.6	12.2	14.3		
Region 7/8 Overall	334,324	20.9	25.0	16.2	16.6		
MHS Average	2,476,397	17.8	21.6	16.2	12.6		

Population:

All beneficiaries who reported using an ER in the past 12 months

Sample size: : 5,585
Survey question: 33
What the exhibit shows:

- Whether beneficiaries have used an ER because they could not obtain an appointment from their usual provider
- How such ER use varies by enrollment status and type of enrollee
- How the findings vary across catchment areas

Findings:

Of the beneficiaries in Region 7/8 who used an ER in the past 12 months TRICARE Prime enrollees (21 to 25 percent) were more likely than non-enrollees (16 to 17 percent) to report using the ER because they could not get an appointment with their usual health care provider.

The percentage of active duty enrollees who used an ER because they could not get a regular appointment is lowest (9 to 13 percent) at Fort Riley, Offutt AFB, and F.E. Warren AFB. The percentage is highest (34 to 38 percent) at Hill AFB, Fort Leonard Wood, Mountain Home AFB, and Ellsworth AFB. The rate of ER use at Mountain Home AFB and Fort Leonard Wood exceeds the Region 7/8 average among every type of beneficiary.

3.2 Percent of Patients Who Waited More Than 30 Days to Get an Appointment for Routine Care in Each Catchment Area, by Enrollment Status and Source of Care

Catchment Area	Population	Enrolled in TRICARE Prime		Not Enrolled in TRICARE Prime	
		MTF	CTF	MTF	CTF
Ft. Huachuca (0008)	17,645	5.6	5.7	11.6	6.0
Luke AFB (0009)	55,668	1.7	8.6	5.8	3.8
Davis Monthan AFB (0010)	32,848	4.5	5.4	8.8	10.6
Ft. Carson (0032)	42,358	5.1	2.7	21.2	5.6
USAF Academy Hosp (0033)	45,176	5.9	3.5	6.7	4.5
Mountain Home AFB (0053)	8,398	10.0	2.5	10.3	3.8
Ft. Riley (0057)	22,676	6.4	1.2	16.3	9.7
Ft. Leavenworth (0058)	28,682	9.7	5.0	11.1	7.7
Ft. Leonard Wood (0075)	22,930	1.4	8.0	7.8	5.9
Whiteman AFB (0076)	9,534	2.1	2.3	26.0	3.9
Malmstrom AFB Clinic (0077)	9,471	1.5	2.2	7.6	2.4
Offutt AFB (0078)	31,813	2.1	3.4	13.2	2.2
Nellis AFB (0079)	43,673	6.3	11.2	16.4	4.8
Kirtland AFB (0083)	28,903	6.7	9.6	11.5	9.9
Holloman AFB (0084)	10,627	7.0	15.3	25.3	8.8
Cannon AFB (0085)	8,291	5.1	12.5	16.5	8.7
Grand Forks AFB (0093)	8,055	11.7	6.9	15.8	6.2
Minot AFB (0094)	8,392	4.3	1.5	9.7	0.9
Ellsworth AFB (0106)	10,054	5.0	6.0	8.0	5.7
Ft. Bliss (0108)	42,213	8.9	10.7	21.1	16.3
Hill AFB (0119)	24,115	8.2	3.2	19.7	4.5
F.E. Warren AFB (0129)	9,659	3.2	0.0	14.1	5.4
Buckley AFB Clinic (7200)	33,112	11.6	10.3	8.4	7.9
Out/Area-Reg 8 (9908)	192,658	3.4	8.0	5.9	7.2
Region 7/8 Overall	746,950	5.5	6.7	11.7	6.7
MHS Average	5,539,478	5.7	5.1	12.8	9.0

Population:

Patients who received some care at a MTF or CTF or both during the 12 months preceding their survey response

Sample size: 12,334

Survey questions: 50a and 65a

What the exhibit shows:

- How waiting periods to get an appointment for routine care at MTFs compare to those at CTFs
- Whether waiting periods vary by enrollment status in TRICARE Prime
- How findings vary across catchment areas

Findings:

In Region 7/8, very few TRICARE Prime enrollees (6 to 7 percent) wait more than 30 days for a routine care appointment, regardless of whether care is received at a MTF or CTF. Among non-enrollees, however, MTF patients (12 percent) are more likely than CTF patients (7 percent) to wait more than 30 days. A 30-day wait is the TRICARE standard for a routine care appointment.

Among non-enrollees who received care at a MTF, the percentage unable to get an appointment within 30 days varies substantially across catchment areas, from less than 6 percent at Luke AFB and outside of catchment areas, to more than 25 percent at Holloman AFB and Whiteman AFB. In contrast, among all other types of patients, the percentage waiting more than 30 days varies little across catchment areas. In nearly all catchment areas, fewer than 10 percent of these patients wait more than 30 days for an appointment.

3.3 Percent of Patients Who Waited More Than 30 Minutes in a Provider's Office in Each Catchment Area, by Enrollment Status and Source of Care

Catchment Area	Population	Enrolled in TRICARE Prime			nrolled RE Prime
		MTF	CTF	MTF	CTF
Ft. Huachuca (0008)	17,645	28.1	7.8	27.0	6.0
Luke AFB (0009)	55,668	19.3	17.0	27.6	12.9
Davis Monthan AFB (0010)	32,848	21.2	11.2	32.5	10.8
Ft. Carson (0032)	42,358	40.6	17.7	42.8	10.5
USAF Academy Hosp (0033)	45,176	22.7	11.6	25.5	12.7
Mountain Home AFB (0053)	8,398	9.4	11.2	9.2	14.3
Ft. Riley (0057)	22,676	38.6	8.5	42.0	6.7
Ft. Leavenworth (0058)	28,682	33.6	17.2	24.9	14.1
Ft. Leonard Wood (0075)	22,930	28.9	21.1	45.5	13.9
Whiteman AFB (0076)	9,534	12.4	14.6	52.0	20.5
Malmstrom AFB Clinic (0077)	9,471	10.5	8.5	22.3	8.6
Offutt AFB (0078)	31,813	11.2	8.1	36.6	5.4
Nellis AFB (0079)	43,673	23.1	31.4	38.6	19.0
Kirtland AFB (0083)	28,903	24.5	21.7	40.3	8.1
Holloman AFB (0084)	10,627	19.0	15.5	27.1	18.5
Cannon AFB (0085)	8,291	12.2	18.7	18.7	22.6
Grand Forks AFB (0093)	8,055	18.2	13.1	20.7	6.9
Minot AFB (0094)	8,392	11.2	6.2	11.8	1.1
Ellsworth AFB (0106)	10,054	12.0	13.5	7.9	8.2
Ft. Bliss (0108)	42,213	49.1	16.9	57.6	33.7
Hill AFB (0119)	24,115	21.5	10.7	25.3	8.1
F.E. Warren AFB (0129)	9,659	11.0	12.8	20.5	10.4
Buckley AFB Clinic (7200)	33,112	21.8	8.4	33.0	8.3
Out/Area-Reg 8 (9908)	192,658	21.1	16.9	27.8	15.3
Region 7/8 Overall	746,950	25.6	15.2	33.2	13.7
MHS Average	5,539,478	32.1	17.3	32.7	16.1

Population:

Patients who received some care at a MTF or CTF or both during the 12 months preceding their survey response

Sample size: 12,334

Survey questions: 48 and 63

What the exhibit shows:

- How office waiting periods at MTFs compare to those at CTFs
- How waiting periods vary by enrollment status in TRICARE Prime
- How findings vary across catchment areas

Findings:

In Region 7/8, MTF patients (26 to 33 percent) are more likely than CTF patients (14 to 15 percent) to wait more than 30 minutes to see a provider. The TRICARE standard for office waiting periods is 30 minutes.

MTF patients in Region 7/8 were most likely to experience long office waits at Fort Carson, Fort Bliss, and Fort Riley, and least likely to experience long waits at Mountain Home AFB, Malmstrom AFB Clinic, Offutt AFB, and Minot AFB. Among CTF patients, long office waits were most prevalent at Whiteman AFB and Fort Bliss.

3.4 Percent of Patients Reporting Selected Reasons for Not Relying on a Military Facility for Most of Their Care, by Catchment Area

		Reasons Reported											
Catchment Area	Population	Never try to use MTF	No care needed in past 12 months	MTF is too far away	Hard to get an appointment at MTF	Can't see the same provider each visit	MTF usually used is closed	Needed services not available	Better care at civilian provider	Ineligible for military care	No appt. avail. for beneficiary like me	Difficult to find a parking space	Other
Ft. Huachuca (0008)	7,382	18.2	12.2	2.9	29.4	23.1	5.0	26.7	35.0	6.6	19.8	0.0	26.1
Luke AFB (0009)	44,860	30.1	13.1	38.6	37.2	16.3	17.2	11.4	19.9	8.9	16.5	0.9	17.4
Davis Monthan AFB (0010)	22,534	22.9	11.3	7.1	38.8	17.5	9.0	16.3	21.9	13.1	25.5	0.6	21.7
Ft. Carson (0032)	17,003	17.7	13.7	12.6	36.9	18.5	1.1	16.5	26.6	20.6	22.6	1.9	18.6
USAF Academy Hosp (0033)	22,837	16.6	14.5	6.1	37.4	23.4	3.9	15.2	28.1	19.4	26.6	2.1	19.5
Mountain Home AFB (0053)	2,494	7.2	18.0	8.2	34.8	15.3	0.1	20.6	16.1	8.8	19.5	0.0	19.7
Ft. Riley (0057)	5,886	9.2	18.4	10.6	42.1	16.9	0.3	10.9	37.8	9.4	18.0	1.5	25.7
Ft. Leavenworth (0058)	18,499	32.0	11.5	42.4	26.5	15.9	3.5	16.8	27.9	8.1	8.0	0.8	15.0
Ft. Leonard Wood (0075)	8,157	15.7	33.3	27.2	26.7	10.7	6.0	9.2	16.5	15.9	13.2	1.1	30.4
Whiteman AFB (0076)	4,631	17.6	14.2	16.6	43.4	18.7	4.9	20.8	25.2	9.3	22.0	0.0	13.6
Malmstrom AFB Clinic (0077)	4,415	19.5	8.5	4.8	35.9	18.2	0.8	21.7	35.2	9.6	25.6	1.4	18.4
Offutt AFB (0078)	17,499	26.3	12.5	11.3	36.3	24.8	4.8	9.6	29.9	11.1	20.6	1.9	21.6
Nellis AFB (0079)	30,637	25.9	8.8	11.5	40.5	19.7	0.6	17.0	27.9	8.6	22.2	0.9	22.3
Kirtland AFB (0083)	19,122	29.1	11.2	9.6	24.3	18.1	1.2	10.9	28.0	14.7	16.6	0.4	17.1
Holloman AFB (0084)	4,857	8.0	17.8	7.9	42.4	18.4	0.8	22.0	26.1	7.8	28.9	0.2	14.3
Cannon AFB (0085)	2,783	15.7	16.3	4.4	40.5	12.2	0.8	17.3	14.1	9.3	26.4	0.0	24.1
Grand Forks AFB (0093)	2,770	13.3	16.9	11.5	34.7	19.4	0.4	22.0	34.3	6.9	20.6	2.8	22.0
Minot AFB (0094)	2,562	7.4	19.5	17.9	35.1	23.3	0.0	16.6	26.7	4.2	14.7	0.6	22.7
Ellsworth AFB (0106)	3,376	20.9	18.8	9.2	33.5	20.0	1.9	22.1	20.7	3.6	16.3	1.1	27.4
Ft. Bliss (0108)	16,695	15.4	15.9	12.7	34.9	17.8	0.0	16.1	22.9	8.2	19.5	3.2	26.2
Hill AFB (0119)	16,763	28.3	13.2	21.6	37.7	20.2	1.2	16.5	28.7	11.2	21.3	0.6	16.2
F.E. Warren AFB (0129)	4,540	15.7	13.2	9.8	39.9	12.9	5.7	21.7	22.5	10.5	25.4	0.4	16.5
Buckley AFB Clinic (7200)	31,697	16.3	6.5	40.4	20.1	11.6	72.7	7.2	17.8	4.7	9.5	0.4	8.6
Out/Area-Reg 8 (9908)	186,354	26.2	12.6	65.1	22.1	7.8	6.6	8.5	14.4	6.3	8.6	0.6	9.6
Region 7/8 Overall	498,353	23.8	12.7	36.9	29.6	14.1	10.0	12.2	21.0	9.1	15.1	0.9	15.4
MHS Average	3,467,507	26.4	11.7	37.1	27.0	15.9	10.5	12.3	23.3	7.3	12.5	2.2	16.7

Population:

Beneficiaries who received some care from a MTF but most of their care from a CTF during the 12 months preceding their survey response

Sample size: 7,738

Survey question: 56

What the exhibit shows:

- Why patients who reported getting most of their care from a civilian facility chose to do so
- How findings vary across catchment areas

Findings:

Twenty-four percent of patients in Region 7/8 reported that they had never tried to use a MTF. Other frequently cited reasons for not receiving care at a military facility are the distance to a MTF (37 percent), the difficulty of making appointments at a MTF (30 percent), and the higher quality of care at civilian facilities (21 percent).

In most catchment areas in Region 7/8, the difficulty of making an appointment at a MTF is the most commonly cited barrier to MTF use. At Buckley AFB, the most common reason is the closing of the MTF usually used by the beneficiary (73 percent). For people outside of a catchment area, the distance from a MTF is the most common barrier (65 percent).



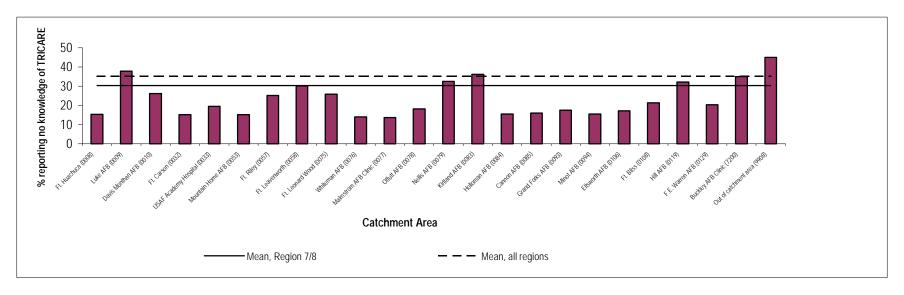
Knowledge of TRICARE and TRICARE Prime

This chapter is designed to address the question, "How knowledgeable are beneficiaries about TRICARE, and what sources of information about TRICARE do beneficiaries use?" The HCSDB assesses beneficiary knowledge of TRICARE in three ways. First, it asks beneficiaries to assess the level of their knowledge about TRICARE using a 4-point scale ranging from a great deal to nothing. Second, it asks beneficiaries to rate the clarity of their information about TRICARE using a 5-point scale ranging from very clear to very unclear. Third, it asks beneficiaries to indicate the sources of their information about TRICARE.

The key findings are:

- Thirty percent of beneficiaries in Region 7/8 reported having no knowledge of TRICARE. The percentage of beneficiaries with no knowledge of TRICARE is lowest (14 percent) at Whiteman AFB and Malmstrom AFB Clinic. The percentage is highest (36 to 45 percent) at Kirtland AFB, Luke AFB and outside of Region 7/8 catchment areas.
- In Region 7/8, retirees, survivors, and their family members age 65 or over (47 percent) were more likely than other types of beneficiaries (23 to 36 percent) to have unclear information about enrolling in TRICARE Prime. The percentage of active duty personnel with unclear information about enrolling in TRICARE Prime is highest (39 to 42 percent) at Fort Leonard Wood, Ellsworth AFB, and outside of Region 7/8 catchment areas.
- Beneficiaries in Region 7/8 most frequently cited the following as sources of information about TRICARE: information packages mailed to beneficiaries (64 percent), a TRICARE presentation (36 percent), and a military base newspaper (33 percent). Other commonly cited sources of information in some catchment areas are friends and neighbors and a visit to the TRICARE service center.

4.1 Beneficiaries' Levels of Knowledge of TRICARE, by Catchment Area



Population:

All beneficiaries

Sample size: 13,539

Vertical axis:

The percent of the sample reporting no knowledge of TRICARE

Survey question: 71
What the exhibit shows:

- What percent of beneficiaries in the MHS and in Region 7/8 have no knowledge of TRICARE
- How this percentage varies across catchment areas

Findings:

Thirty percent of beneficiaries in Region 7/8 reported having no knowledge of TRICARE. The percentage of beneficiaries with no knowledge of TRICARE is lowest (14 percent) at Whiteman AFB and Malmstrom AFB Clinic. The percentage is highest (36 to 45 percent) at Kirtland AFB, Luke AFB and outside of Region 7/8 catchment areas.

4.2 Percent of Beneficiaries in Each Catchment Area With Unclear Information about Enrolling in TRICARE Prime, by Type of Beneficiary

		Type of Beneficiary								
Catchment Area	Population	Active Duty Personnel	Active Duty Family Members	Retirees, Survivors, and Family Under Age 65	Retirees, Survivors, and Family Age 65 or Over					
Ft. Huachuca (0008)	15,739	29.5	22.2	19.9	38.4					
Luke AFB (0009)	36,493	32.2	10.8	28.8	43.5					
Davis Monthan AFB (0010)	26,383	27.6	12.8	29.7	35.4					
Ft. Carson (0032)	36,883	18.6	26.1	27.0	34.0					
USAF Academy Hosp (0033)	38,321	22.0	20.5	26.2	43.3					
Mountain Home AFB (0053)	8,030	20.2	15.9	21.2	34.7					
Ft. Riley (0057)	17,833	21.7	22.8	31.0	42.4					
Ft. Leavenworth (0058)	21,524	20.9	21.7	36.6	57.1					
Ft. Leonard Wood (0075)	18,986	38.7	18.7	20.5	43.8					
Whiteman AFB (0076)	8,794	15.6	14.7	16.6	32.2					
Malmstrom AFB Clinic (0077)	8,509	13.8	15.7	25.4	43.4					
Offutt AFB (0078)	28,425	20.7	18.3	29.8	35.3					
Nellis AFB (0079)	31,480	26.7	14.5	32.2	42.5					
Kirtland AFB (0083)	19,309	16.8	26.3	26.1	32.4					
Holloman AFB (0084)	9,941	32.0	18.3	24.7	48.7					
Cannon AFB (0085)	7,819	20.6	13.3	26.9	31.0					
Grand Forks AFB (0093)	7,351	17.8	21.7	34.3	37.0					
Minot AFB (0094)	7,980	23.3	8.8	24.7	30.6					
Ellsworth AFB (0106)	8,916	38.9	28.5	27.5	31.2					
Ft. Bliss (0108)	35,434	14.0	17.8	26.7	52.2					
Hill AFB (0119)	17,325	23.8	26.2	35.6	55.5					
F.E. Warren AFB (0129)	8,498	14.8	18.5	36.9	35.9					
Buckley AFB Clinic (7200)	22,464	27.9	19.7	40.9	41.4					
Out/Area-Reg 8 (9908)	112,982	42.2	47.9	55.0	57.0					
Region 7/8 Overall	555,419	25.2	22.7	35.9	47.0					
MHS Average	3,803,675	29.9	26.1	37.1	47.1					

Population:

Beneficiaries reporting knowing at least a little about TRICARE

Sample size: 9,364

Survey question: 73a

What the exhibit shows:

- The percentage of beneficiaries that have unclear information about enrolling in TRICARE Prime
- How the findings vary by type of beneficiary
- How the findings vary across catchment areas

Findings:

Among beneficiaries in Region 7/8 who reported knowing at least a little about TRICARE, retirees, survivors, and their family members age 65 or over (47 percent) were more likely than other types of beneficiaries (23 to 36 percent) to have unclear information about enrolling in TRICARE Prime.

The percentage of active duty personnel with unclear information about enrolling in TRICARE Prime is lowest (13 to 15 percent) at Malmstrom AFB Clinic, Fort Bliss, and F.E. Warren AFB. The percentage is highest (39 to 42 percent) at Fort Leonard Wood, Ellsworth AFB, and outside of Region 7/8 catchment areas.

4.3 Percent of Beneficiaries Reporting Selected Sources of Information about TRICARE, by Catchment Area

		Sources of Information Used										
Catchment Area	Population	TRICARE presentation	Information package	Military doctor	Civilian doctor	TRICARE information number	Military base newspaper	Regional newspaper	Friends and neighbors	TRICARE Service Center	Radio/TV	Other
Ft. Huachuca (0008)	15,739	42.1	69.8	14.9	5.2	15.9	40.4	15.6	35.9	20.9	0.7	18.2
Luke AFB (0009)	36,493	29.6	64.6	13.0	6.2	16.2	22.3	4.2	16.8	25.6	0.5	21.5
Davis Monthan AFB (0010)	26,383	43.6	58.9	15.3	4.6	18.4	48.6	3.9	28.6	27.6	0.2	21.6
Ft. Carson (0032)	36,883	51.7	69.9	15.1	5.1	21.2	31.9	23.8	33.7	18.6	7.1	16.5
USAF Academy Hosp (0033)	38,321	45.0	71.2	20.4	10.6	21.3	37.8	42.5	43.9	20.4	5.9	15.6
Mountain Home AFB (0053)	8,030	44.4	71.6	20.7	3.2	19.7	43.8	7.4	42.6	28.8	1.4	16.0
Ft. Riley (0057)	17,833	37.6	80.1	23.4	4.8	22.1	26.9	7.6	35.2	24.2	1.0	16.1
Ft. Leavenworth (0058)	21,524	39.1	66.2	19.1	1.6	19.9	37.7	3.6	27.3	27.2	0.6	22.9
Ft. Leonard Wood (0075)	18,986	49.8	63.4	21.4	2.3	18.8	30.5	5.1	39.1	21.8	1.1	16.4
Whiteman AFB (0076)	8,794	52.0	76.4	19.9	7.5	21.6	49.2	3.9	29.0	23.1	1.1	15.8
Malmstrom AFB Clinic (0077)	8,509	48.4	70.0	20.8	7.1	21.6	42.3	5.2	36.8	28.1	0.5	17.2
Offutt AFB (0078)	28,425	46.3	70.6	18.7	4.7	18.7	45.9	6.6	36.7	29.2	0.5	16.9
Nellis AFB (0079)	31,480	27.6	59.1	13.6	3.5	19.5	31.7	1.4	18.9	31.1	1.2	22.2
Kirtland AFB (0083)	19,309	38.2	63.4	15.2	2.8	15.0	35.4	3.2	23.7	21.4	0.7	21.6
Holloman AFB (0084)	9,941	47.0	63.0	15.1	6.9	19.7	53.7	18.7	35.4	31.0	1.5	16.2
Cannon AFB (0085)	7,819	50.8	68.6	17.4	2.4	15.4	49.5	4.8	32.7	19.5	4.0	18.3
Grand Forks AFB (0093)	7,351	53.7	71.2	17.0	3.4	26.0	43.5	2.4	43.2	20.9	1.5	16.7
Minot AFB (0094)	7,980	34.9	69.4	19.1	6.8	23.0	44.8	7.8	37.5	28.1	1.5	18.7
Ellsworth AFB (0106)	8,916	44.0	65.9	21.5	5.1	15.4	37.6	10.8	34.2	29.4	0.3	19.5
Ft. Bliss (0108)	35,434	40.0	65.7	15.4	3.1	16.1	41.2	12.0	32.3	25.0	2.3	16.3
Hill AFB (0119)	17,325	30.4	68.5	19.0	5.1	22.1	33.9	5.9	26.9	30.6	0.1	20.0
F.E. Warren AFB (0129)	8,498	37.1	68.1	17.7	5.1	20.0	48.4	4.4	32.1	27.1	1.1	20.4
Buckley AFB Clinic (7200)	22,464	31.2	62.7	10.3	3.9	18.3	22.7	5.4	23.5	22.3	1.2	23.5
Out/Area-Reg 8 (9908)	112,982	16.3	52.2	10.4	4.0	14.7	18.7	3.5	15.1	10.7	0.9	32.9
Region 7/8 Overall	555,419	35.8	64.0	15.6	4.7	18.2	33.1	9.4	27.8	22.0	1.7	21.7
MHS Average	3,803,675	33.2	56.5	15.2	4.4	16.4	30.8	7.2	25.4	20.6	2.4	23.4

Population:

Beneficiaries reporting knowing at least a little about TRICARE

Sample size: 9,364

Survey question: 72

What the exhibit shows:

The sources of information about TRICARE that beneficiaries

Which information sources are most commonly used in each catchment area

Findings:

In Region 7/8, beneficiaries who reported knowing at least a little about TRICARE most frequently cited the following as sources of information about TRICARE: information packages mailed to beneficiaries (64 percent), a TRICARE presentation (36 percent), and a military base newspaper (33 percent). This result applies to most of the individual catchment areas in Region 7/8 as well.

Other commonly cited sources of information in some catchment areas are friends and neighbors and a visit to the TRICARE service center. Beneficiaries who live outside of a catchment area were less likely than the average beneficiary in Region 7/8 to receive information through most sources.



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Source of Health Care

This chapter is designed to address the question, "What health care *services* do beneficiaries use, and what are the *sources* of those services?" The HCSDB asks about pharmacy use as well as sources of health care.

The key findings are:

- In Region 7/8, 8 percent of active duty beneficiaries used a military pharmacy to fill a prescription written by a civilian provider. The same is true for 21 percent of active duty family members and 29 to 46 percent of retirees, survivors, and family members. The percentage of active duty beneficiaries using a military pharmacy to fill a civilian prescription is highest (23 percent) at Fort Huachuca, and lowest (3 to 4 percent) at Fort Carson, Mountain Home AFB, and Fort Leonard Wood.
- In Region 7/8, 90 percent of active duty personnel use a MTF for their regular source of care, as do 77 percent of active duty family members. In contrast, this is true for only 29 percent of retirees under age 65, and 12 percent of retirees age 65 or over. The majority of these beneficiaries use a CTF instead. This pattern also appears in most catchment areas in Region 7/8.

5.1 Percent of Beneficiaries in Each Catchment Area Who Used a Military Pharmacy to Fill Prescriptions Written by a Civilian Provider, by Type of Beneficiary

		Type of Beneficiary					
Catchment Area	Population	Active Duty Personnel	Active Duty Family Members	Retirees, Survivors, and Family Under Age 65	Retirees, Survivors, and Family Age 65 or Over		
Ft. Huachuca (0008)	18,940	22.8	29.1	41.0	67.4		
Luke AFB (0009)	61,619	7.3	26.8	27.2	57.6		
Davis Monthan AFB (0010)	36,737	14.0	28.4	42.0	60.2		
Ft. Carson (0032)	45,620	4.1	21.6	42.5	70.8		
USAF Academy Hosp (0033)	48,516	5.8	18.6	43.6	72.1		
Mountain Home AFB (0053)	9,670	4.1	13.7	28.7	57.1		
Ft. Riley (0057)	24,291	6.4	15.8	30.6	45.1		
Ft. Leavenworth (0058)	31,722	11.9	20.9	19.7	37.4		
Ft. Leonard Wood (0075)	25,968	3.2	15.3	21.6	58.6		
Whiteman AFB (0076)	10,397	10.1	27.5	36.5	56.6		
Malmstrom AFB Clinic (0077)	10,120	14.1	33.1	53.4	63.4		
Offutt AFB (0078)	35,177	5.9	20.3	40.2	64.7		
Nellis AFB (0079)	48,649	7.7	18.5	44.5	55.8		
Kirtland AFB (0083)	31,474	13.0	22.1	31.6	60.8		
Holloman AFB (0084)	11,978	13.3	29.4	42.6	56.7		
Cannon AFB (0085)	9,476	11.5	24.6	37.4	71.4		
Grand Forks AFB (0093)	8,969	7.5	25.3	40.6	60.1		
Minot AFB (0094)	9,492	6.4	24.8	44.7	63.0		
Ellsworth AFB (0106)	10,939	8.5	26.4	26.5	39.3		
Ft. Bliss (0108)	46,394	8.1	11.0	25.0	46.3		
Hill AFB (0119)	26,705	13.5	29.5	45.2	63.5		
F.E. Warren AFB (0129)	10,789	10.5	29.7	46.5	60.7		
Buckley AFB Clinic (7200)	36,428	9.8	19.2	15.2	29.5		
Out/Area-Reg 8 (9908)	218,007	6.9	16.5	16.9	30.3		
Region 7/8 Overall	828,078	8.3	21.1	28.7	46.1		
MHS Average	6,094,167	9.1	24.1	26.7	41.0		

Population:

All beneficiaries

Sample size: 13,539
Survey questions: 53
What the exhibit shows:

- Whether beneficiaries use military pharmacies to fill prescriptions written by civilian provider
- How usage varies by the type of beneficiary
- How findings vary across catchment areas

Findings:

In Region 7/8, 8 percent of active duty beneficiaries used a military pharmacy to fill a prescription written by a civilian provider. The same is true for 21 percent of active duty family members; 29 percent of retirees, survivors, and family members under age 65; and 46 percent of retirees, survivors, and family members age 65 or over.

The percentage of active duty beneficiaries using a military pharmacy to fill a civilian prescription is highest (23 percent) at Fort Huachuca, and lowest (3 to 4 percent) at Fort Carson, Mountain Home AFB, and Fort Leonard Wood. Retirees, survivors, and family members at Buckley AFB and those outside of catchment areas were the least likely to use a military pharmacy to fill a civilian prescription.

5.2 Usual Source of Care for Beneficiaries Who Are Sick or Need Advice, by Catchment Area and by Type of Beneficiary

							Type of I	3eneficiary	/				
Catchment Area	Population	Active Duty Personnel			Active Duty	•	Retirees, Survivors, and Family Under Age 65		Retirees, Survivors, and Family Age 65 or Over				
		MTF	CTF	Other	MTF	CTF	Other	MTF	CTF	Other	MTF	CTF	Other
Ft. Huachuca (0008)	16,772	96.3	1.4	2.3	89.0	11.0	0.0	52.0	46.9	1.1	28.6	66.9	4.5
Luke AFB (0009)	56,603	95.0	2.5	2.5	70.1	28.5	1.4	21.2	72.6	6.3	4.4	85.6	10.0
Davis Monthan AFB (0010)	33,071	95.5	3.1	1.4	86.2	12.5	1.3	34.1	60.4	5.5	3.8	83.2	13.1
Ft. Carson (0032)	41,032	96.0	3.4	0.6	90.2	9.8	0.0	60.5	37.5	2.1	16.5	74.8	8.7
USAF Academy Hosp (0033)	44,165	89.4	9.5	1.1	90.7	6.2	3.1	45.3	53.0	1.7	12.2	80.0	7.9
Mountain Home AFB (0053)	8,326	98.3	0.9	0.9	95.6	3.3	1.1	66.9	31.1	2.0	19.1	75.3	5.6
Ft. Riley (0057)	21,567	96.2	0.0	3.8	88.7	8.6	2.7	60.6	38.0	1.5	49.7	49.3	1.1
Ft. Leavenworth (0058)	27,950	85.9	9.5	4.6	77.3	19.9	2.9	25.8	71.8	2.4	13.9	78.3	7.8
Ft. Leonard Wood (0075)	21,381	80.3	17.5	2.2	86.4	13.6	0.0	74.5	21.4	4.2	31.1	68.3	0.6
Whiteman AFB (0076)	9,380	97.9	1.5	0.6	78.7	18.8	2.5	44.4	52.9	2.7	5.6	92.5	1.9
Malmstrom AFB Clinic (0077)	9,078	95.1	4.9	0.0	75.8	19.1	5.1	36.8	59.7	3.5	17.3	77.1	5.7
Offutt AFB (0078)	31,567	98.8	1.2	0.0	84.6	11.3	4.2	31.6	63.6	4.8	16.2	78.6	5.2
Nellis AFB (0079)	42,710	97.2	1.4	1.4	84.8	12.3	2.9	33.8	60.8	5.4	15.4	73.2	11.4
Kirtland AFB (0083)	29,048	96.6	1.1	2.3	91.8	6.8	1.3	30.5	59.5	10.1	5.3	69.2	25.4
Holloman AFB (0084)	10,140	97.4	2.6	0.0	88.9	6.9	4.2	51.3	46.7	2.1	32.0	66.7	1.3
Cannon AFB (0085)	8,114	98.6	1.4	0.0	94.1	5.9	0.0	54.7	44.6	0.7	17.7	79.7	2.6
Grand Forks AFB (0093)	7,795	97.2	0.9	1.8	86.4	11.3	2.3	38.4	61.6	0.0	9.8	88.2	2.0
Minot AFB (0094)	8,456	98.5	1.5	0.0	78.4	21.6	0.0	44.6	53.7	1.7	33.3	64.6	2.1
Ellsworth AFB (0106)	9,862	96.6	3.4	0.0	93.1	6.9	0.0	65.1	33.6	1.4	43.3	54.8	1.8
Ft. Bliss (0108)	41,793	95.4	4.6	0.0	94.4	5.6	0.0	65.2	33.3	1.5	46.6	51.1	2.3
Hill AFB (0119)	23,355	100.0	0.0	0.0	74.4	24.1	1.5	19.4	75.0	5.7	7.3	86.0	6.8
F.E. Warren AFB (0129)	9,916	96.8	3.2	0.0	89.7	10.3	0.0	30.7	68.1	1.2	12.2	86.6	1.3
Buckley AFB Clinic (7200)	33,837	89.0	11.0	0.0	25.3	72.1	2.6	2.7	86.1	11.3	3.5	79.3	17.2
Out/Area-Reg 8 (9908)	197,698	48.2	47.4	4.4	31.8	61.0	7.1	11.7	84.9	3.4	7.8	88.6	3.6
Region 7/8 Overall	743,617	89.6	8.8	1.6	77.1	20.5	2.5	28.7	67.1	4.2	11.7	80.6	7.7
MHS Average	5,509,387	90.4	6.8	1.1	70.6	25.2	2.3	27.7	64.1	4.3	14.9	73.1	7.1

Population:

Beneficiaries who reported having a usual source of care

Sample size: 12,240 Survey question: 31

What the exhibit shows:

- Types of facilities from which beneficiaries usually seek care
- How the usual source of care varies by the type of beneficiary
- How findings vary across catchment areas

Findings:

In Region 7/8, 90 percent of active duty personnel use a MTF for their regular source of care, as do 77 percent of active duty family members. In contrast, this is true for only 29 percent of retirees and their family members under age 65, and 12 percent of retirees and their family members age 65 or over. The majority of these beneficiaries use a CTF instead.

This pattern -- MTF use by active duty personnel and their family members and CTF use by retirees, survivors, and their family members -- also appears in most catchment areas in Region 7/8. However, in some catchment areas, retirees, survivors, and family members under age 65 are more likely to rely on an MTF rather than a CTF. Less than half of the beneficiaries living outside of catchment areas rely on a MTF, regardless of beneficiary type.



Use of Health Care

This chapter is designed to address the question, "How much health care do MHS beneficiaries use?" Although the HCSDB asked a number of questions about use of care, we report on the amount of care used in terms of a single indicator – the number of outpatient visits in the 12 months prior to the survey.

The key findings are:

- In the 12 months preceding the survey, TRICARE Prime enrollees in Region 7/8 who used MTFs were more likely to have six or more outpatient visits (32 percent) than those who used CTFs (26 percent). In contrast, among non-enrollees, MTF patients (16 percent) were less likely than CTF patients (48 percent) to have six or more outpatient visits. The percentage of MTF enrollees with six or more outpatient visits was highest (37 to 39 percent) at Fort Huachuca, Fort Riley, Fort Leonard Wood, Malmstrom AFB Clinic, Kirtland AFB, and Ellsworth AFB. The percentage was lowest (22 to 25 percent) at Buckley AFB Clinic, Grand Forks AFB, Fort Leavenworth, and outside of Region 7/8 catchment areas.
- The percentage of MTF enrollees with no outpatient visits was highest (17 to 23 percent) at Luke AFB, Buckley AFB Clinic, and outside of Region 7/8 catchment areas. The percentage was lowest (2 to 4 percent) at Nellis AFB, Fort Leavenworth, Malmstrom AFB Clinic, and Grand Forks AFB.

6.1a Percent of Patients in Each Catchment Area Who Had Six or More Outpatient Visits in the Past Year, by Enrollment Status and Source of Care

Catchment Area	Population	Enrolled in TRICARE Prime			nrolled RE Prime
		MTF	CTF	MTF	CTF
Ft. Huachuca (0008)	17,645	37.1	27.1	21.4	43.1
Luke AFB (0009)	55,668	28.6	38.0	8.5	57.4
Davis Monthan AFB (0010)	32,848	28.6	30.3	16.9	52.9
Ft. Carson (0032)	42,358	29.9	25.9	19.5	51.9
USAF Academy Hosp (0033)	45,176	33.6	20.5	13.9	42.6
Mountain Home AFB (0053)	8,398	33.8	17.7	31.9	42.2
Ft. Riley (0057)	22,676	36.1	15.4	28.8	42.6
Ft. Leavenworth (0058)	28,682	24.7	17.3	23.4	40.6
Ft. Leonard Wood (0075)	22,930	38.7	23.2	36.8	40.7
Whiteman AFB (0076)	9,534	29.0	20.1	8.2	45.4
Malmstrom AFB Clinic (0077)	9,471	38.8	30.4	17.1	49.5
Offutt AFB (0078)	31,813	36.3	25.7	12.4	35.9
Nellis AFB (0079)	43,673	35.9	22.3	16.8	50.3
Kirtland AFB (0083)	28,903	36.9	26.1	15.5	47.5
Holloman AFB (0084)	10,627	28.4	27.7	22.9	40.8
Cannon AFB (0085)	8,291	36.1	22.8	21.3	54.9
Grand Forks AFB (0093)	8,055	23.2	19.4	9.5	33.8
Minot AFB (0094)	8,392	32.6	17.9	28.0	41.9
Ellsworth AFB (0106)	10,054	36.7	22.1	33.4	37.6
Ft. Bliss (0108)	42,213	35.0	17.7	28.6	50.1
Hill AFB (0119)	24,115	31.4	26.4	11.2	49.8
F.E. Warren AFB (0129)	9,659	33.7	12.4	20.9	43.4
Buckley AFB Clinic (7200)	33,112	22.2	35.7	10.2	53.9
Out/Area-Reg 8 (9908)	192,658	24.3	30.6	12.0	46.4
Region 7/8 Overall	746,950	32.2	25.9	16.4	47.8
MHS Average	5,539,478	33.1	28.4	26.1	47.3

Population:

Patients who received some care at a MTF or CTF during the 12 months preceding their survey response

Sample size: 12,334

Survey questions: 46 and 61

What the exhibit shows:

- The percent of patients who had six or more outpatient visits in the past year
- How the visit rates vary by enrollment status and source of care
- How findings vary across catchment areas

Findings:

In the 12 months preceding the survey, TRICARE Prime enrollees in Region 7/8 who used military facilities were more likely to have six or more outpatient visits (32 percent) than those who used civilian facilities (26 percent). In contrast, among non-enrollees, MTF patients (16 percent) were less likely than CTF patients (48 percent) to have six or more outpatient visits.

The percentage of MTF enrollees with six or more outpatient visits was highest (37 to 39 percent) at Fort Huachuca, Fort Riley, Fort Leonard Wood, Malmstrom AFB Clinic, Kirtland AFB, and Ellsworth AFB. The percentage was lowest (22 to 25 percent) at Buckley AFB Clinic, Grand Forks AFB, Fort Leavenworth, and outside of Region 7/8 catchment areas.

6.1b Percent of Patients in Each Catchment Area Who Had No Outpatient Visits in the Past Year, by Enrollment Status and Source of Care

Catchment Area	Population	Enrolled in TRICARE Prime		Not Enrolled in TRICARE Prime	
		MTF	CTF	MTF	CTF
Ft. Huachuca (0008)	17,645	7.5	15.3	24.8	2.4
Luke AFB (0009)	55,668	17.1	19.0	50.4	3.3
Davis Monthan AFB (0010)	32,848	9.1	6.4	49.0	5.5
Ft. Carson (0032)	42,358	9.3	17.6	23.6	6.7
USAF Academy Hosp (0033)	45,176	8.0	20.0	28.4	2.9
Mountain Home AFB (0053)	8,398	11.3	24.3	18.0	7.0
Ft. Riley (0057)	22,676	5.2	23.7	18.4	5.2
Ft. Leavenworth (0058)	28,682	3.0	13.2	27.1	4.4
Ft. Leonard Wood (0075)	22,930	8.9	27.5	22.4	7.6
Whiteman AFB (0076)	9,534	7.5	15.2	55.8	9.3
Malmstrom AFB Clinic (0077)	9,471	4.3	11.3	26.7	3.1
Offutt AFB (0078)	31,813	5.7	18.7	34.1	5.6
Nellis AFB (0079)	43,673	1.8	12.2	43.8	3.4
Kirtland AFB (0083)	28,903	6.1	16.4	44.2	2.4
Holloman AFB (0084)	10,627	8.6	19.7	20.9	5.3
Cannon AFB (0085)	8,291	7.3	22.6	30.7	3.5
Grand Forks AFB (0093)	8,055	4.4	19.1	43.7	4.5
Minot AFB (0094)	8,392	7.7	15.8	14.8	5.5
Ellsworth AFB (0106)	10,054	5.1	20.4	19.1	4.1
Ft. Bliss (0108)	42,213	6.7	27.7	18.8	6.1
Hill AFB (0119)	24,115	6.8	13.9	50.1	5.6
F.E. Warren AFB (0129)	9,659	7.1	22.9	38.5	6.9
Buckley AFB Clinic (7200)	33,112	21.2	4.8	78.1	2.9
Out/Area-Reg 8 (9908)	192,658	23.0	12.7	41.1	5.0
Region 7/8 Overall	746,950	9.0	16.6	38.1	4.6
MHS Average	5,539,478	9.5	17.9	30.6	5.2

Population:

Patients who received some care at a MTF or CTF during the 12 months preceding their survey response

Sample size: 12,334

Survey questions: 46 and 61

What the exhibit shows:

- The percent of patients who had no outpatient visits in the past year
- How the visit rates vary by enrollment status and source of care
- How findings vary across catchment areas

Findings:

In the 12 months preceding the survey, TRICARE Prime enrollees in Region 7/8 who used civilian facilities (17 percent) were more likely to have no outpatient visits than those who used military facilities (9 percent). In contrast, among non-enrollees, MTF patients (38 percent) were much more likely than CTF patients (5 percent) to have no outpatient visits.

The percentage of MTF enrollees with no outpatient visits was highest (17 to 23 percent) at Luke AFB, Buckley AFB Clinic, and outside of Region 7/8 catchment areas. The percentage was lowest (2 to 4 percent) at Nellis AFB, Fort Leavenworth, Malmstrom AFB Clinic, and Grand Forks AFB.

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Use of Preventive Services

This chapter is designed to address the question, "How much, and what types of, *preventive health care* do beneficiaries use?" The HCSDB asked all beneficiaries whether they used each of the items in an extensive list of preventive health care services and how long ago the most recent use of care was.

The key findings are:

- Nearly all MHS beneficiaries (95 to 97 percent) had a blood pressure screening in the past two years, as did 95 to 97 percent of beneficiaries in Region 7/8. All of these results exceed the civilian Healthy People 2000 goal of 90 percent. In nearly all catchment areas in Region 7/8, at least 90 percent of each type of beneficiary had a blood pressure screening in the past two years.
- In Region 7/8, non-active duty beneficiaries enrolled in TRICARE Prime (70 percent) were the least likely to have had a cholesterol screening in the past five years, while non-enrollees age 65 or over (93 percent) were the most likely. The Healthy People 2000 goal for adults is 75 percent. The percentage of active duty enrollees who had a cholesterol screening in the past five years is lowest (60 to 61 percent) at Fort Leonard Wood, Minot AFB, and Holloman AFB. The percentage is highest (87 to 91 percent) at Fort Carson, Fort Leavenworth, and Fort Bliss.
- In Region 7/8, 82 percent of female beneficiaries age 50 or over had a breast cancer screening in the past two years. The percentage who had a breast cancer screening is lowest (73 percent) at Fort Leonard Wood and Whiteman AFB, and highest (90 to 93 percent) at Minot AFB and USAF Academy Hospital. All of these results exceed the Healthy People 2000 goal of 60 percent and the civilian benchmark of 56 percent.
- In Region 7/8, female beneficiaries who were enrolled in TRICARE Prime (92 to 94 percent) were more likely than their non-enrolled counterparts (79 to 85 percent) to have had a Pap smear in the past three years. All of these results exceed the Healthy People 2000 goal for adults (75 percent) and the civilian benchmark of 56 percent.
- Ninety-two percent of the female beneficiaries in Region 7/8 who were pregnant at some point during the year preceding the survey received prenatal care during the first trimester. This result exceeds the Healthy People 2000 goal of 90 percent and the 76 to 84 percent observed in the civilian sector.
- In Region 7/8, between 66 and 85 percent of male beneficiaries age 50 or over had a prostate screening in the past two years. The American Cancer Society recommends an annual prostate exam for men age 50 or over.

7.1 Percent of Beneficiaries in Each Catchment Area Who Had Blood Pressure Readings Within the Past Two Years, by Enrollment Status

		Enrollment Status					
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over		
Ft. Huachuca (0008)	18,940	100.0	97.8	99.2	95.9		
Luke AFB (0009)	61,619	98.8	96.0	94.6	97.5		
Davis Monthan AFB (0010)	36,737	98.0	97.7	94.3	97.8		
Ft. Carson (0032)	45,620	96.8	98.4	92.6	92.8		
USAF Academy Hosp (0033)	48,516	98.2	96.6	95.5	97.3		
Mountain Home AFB (0053)	9,670	97.9	95.7	83.1	96.9		
Ft. Riley (0057)	24,291	98.7	98.7	92.1	95.8		
Ft. Leavenworth (0058)	31,722	93.8	95.6	96.1	97.9		
Ft. Leonard Wood (0075)	25,968	98.4	96.4	87.1	96.8		
Whiteman AFB (0076)	10,397	97.5	97.1	91.6	98.6		
Malmstrom AFB Clinic (0077)	10,120	96.9	95.5	92.2	97.2		
Offutt AFB (0078)	35,177	97.3	96.4	93.9	98.5		
Nellis AFB (0079)	48,649	98.9	99.4	94.7	94.3		
Kirtland AFB (0083)	31,474	99.0	94.9	94.6	97.7		
Holloman AFB (0084)	11,978	99.0	96.9	93.6	98.1		
Cannon AFB (0085)	9,476	94.6	92.6	90.9	99.2		
Grand Forks AFB (0093)	8,969	99.2	94.3	95.0	96.4		
Minot AFB (0094)	9,492	97.4	91.6	97.5	98.9		
Ellsworth AFB (0106)	10,939	100.0	97.0	92.0	96.2		
Ft. Bliss (0108)	46,394	97.3	96.9	88.6	94.7		
Hill AFB (0119)	26,705	96.1	94.7	94.7	98.5		
F.E. Warren AFB (0129)	10,789	94.5	96.2	96.7	96.4		
Buckley AFB Clinic (7200)	36,428	95.6	94.8	95.5	99.0		
Out/Area-Reg 8 (9908)	218,007	91.7	98.6	96.1	97.6		
Region 7/8 Overall	828,078	97.0	96.9	95.0	97.2		
MHS Average	6,094,167	97.0	96.3	95.2	97.4		

Population:

All beneficiaries

Sample size: 13,539
Survey question: 12
What the exhibit shows:

Percentage of beneficiaries who had a blood pressure reading in the past two

- How the findings vary by enrollment status and type of enrollee
- How findings vary across catchment areas

Findings:

Nearly all MHS beneficiaries (95 to 97 percent) had a blood pressure screening in the past two years, as did 95 to 97 percent of beneficiaries in Region 7/8. All of these results exceed the civilian Healthy People 2000 goal of 90 percent.

In nearly all catchment areas in Region 7/8, at least 90 percent of each type of beneficiary had a blood pressure screening in the past two years. At Fort Huachuca and Ellsworth AFB, 100 percent of enrolled active duty beneficiaries had a blood pressure screening in the past two years.

7.2 Percent of Beneficiaries in Each Catchment Area Who Had a Cholesterol Screening Within the Past Five Years, by Enrollment Status

		Enrollment Status					
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over		
Ft. Huachuca (0008)	18,940	85.3	72.0	80.2	89.8		
Luke AFB (0009)	61,619	74.7	74.9	81.9	96.6		
Davis Monthan AFB (0010)	36,737	72.7	73.1	74.2	96.7		
Ft. Carson (0032)	45,620	88.6	68.0	70.0	88.7		
USAF Academy Hosp (0033)	48,516	78.6	70.7	81.9	92.6		
Mountain Home AFB (0053)	9,670	68.0	64.5	75.3	93.1		
Ft. Riley (0057)	24,291	75.8	60.8	79.6	90.2		
Ft. Leavenworth (0058)	31,722	86.7	84.0	82.3	89.5		
Ft. Leonard Wood (0075)	25,968	61.1	61.0	62.1	87.5		
Whiteman AFB (0076)	10,397	84.2	68.6	74.0	90.9		
Malmstrom AFB Clinic (0077)	10,120	78.8	68.9	78.6	93.1		
Offutt AFB (0078)	35,177	74.6	68.6	81.4	93.9		
Nellis AFB (0079)	48,649	76.7	79.7	77.3	88.1		
Kirtland AFB (0083)	31,474	72.3	68.3	77.7	96.0		
Holloman AFB (0084)	11,978	61.1	60.9	71.5	88.6		
Cannon AFB (0085)	9,476	73.6	62.9	72.1	92.9		
Grand Forks AFB (0093)	8,969	82.7	59.9	75.9	96.4		
Minot AFB (0094)	9,492	60.2	59.0	54.6	93.8		
Ellsworth AFB (0106)	10,939	73.8	72.5	77.7	91.8		
Ft. Bliss (0108)	46,394	90.7	73.2	74.6	90.1		
Hill AFB (0119)	26,705	74.0	65.1	75.7	92.0		
F.E. Warren AFB (0129)	10,789	64.2	60.5	75.4	94.6		
Buckley AFB Clinic (7200)	36,428	83.2	76.1	85.9	92.6		
Out/Area-Reg 8 (9908)	218,007	78.9	71.2	77.9	93.0		
Region 7/8 Overall	828,078	77.0	70.3	78.1	92.8		
MHS Average	6,094,167	78.2	72.6	81.1	93.0		

Population:

All beneficiaries

Sample size: 13,539
Survey question: 13
What the exhibit shows:

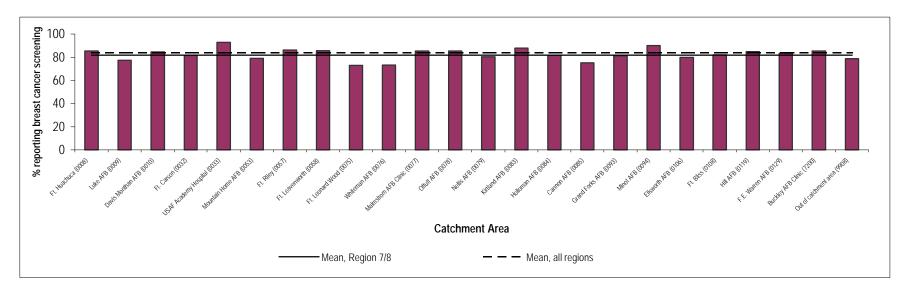
- Percentage of beneficiaries who had a cholesterol screening in the past five years
- How the findings vary by enrollment status and type of enrollee
- How findings vary across catchment areas

Findings:

In Region 7/8, non-active duty beneficiaries enrolled in TRICARE Prime (70 percent) were the least likely to have had a cholesterol screening in the past five years, while non-enrollees age 65 or over (93 percent) were the most likely. The Healthy People 2000 goal for adults is 75 percent.

The percentage of active duty enrollees who had a cholesterol screening in the past five years is lowest (60 to 61 percent) at Fort Leonard Wood, Minot AFB, and Holloman AFB. The percentage is highest (87 to 91 percent) at Fort Carson, Fort Leavenworth, and Fort Bliss.

7.3 Breast Cancer Screening



Population:

Female beneficiaries age 50 or over

Sample size: 3,527

Vertical axis:

The percent of the sample that was "checked by mammography or other X-ray-like procedure" during the two years preceding their survey response

Survey question: 26

What the exhibit shows:

- Percentage of female beneficiaries over age 50 who have had a mammogram or other X-ray-like procedure for breast cancer screening in the past two years
- How the findings vary across catchment areas

Findings:

In Region 7/8, 82 percent of female beneficiaries age 50 or over had a breast cancer screening in the past two years. This result is comparable with the MHS average of 84 percent. Both results exceed the Healthy People 2000 goal of 60 percent and the civilian benchmark of 56 percent.

The percentage of female beneficiaries age 50 or over who had a breast cancer screening in the past two years is lowest (73 percent) at Fort Leonard Wood and Whiteman AFB, and highest (90 to 93 percent) at Minot AFB and USAF Academy Hospital.

7.4 Percent of Female Beneficiaries in Each Catchment Area Who Had a Pap Smear Within the Past Three Years, by Enrollment Status

		Enrollment Status					
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over		
Ft. Huachuca (0008)	9,834	95.0	91.3	91.7	80.8		
Luke AFB (0009)	32,171	100.0	93.3	81.6	78.5		
Davis Monthan AFB (0010)	19,513	95.0	95.8	87.1	82.5		
Ft. Carson (0032)	23,498	100.0	88.9	85.7	79.1		
USAF Academy Hosp (0033)	24,953	87.2	95.6	94.0	89.0		
Mountain Home AFB (0053)	4,770	93.5	92.9	80.9	83.3		
Ft. Riley (0057)	12,853	100.0	95.5	84.6	80.8		
Ft. Leavenworth (0058)	15,503	86.7	92.8	78.4	83.3		
Ft. Leonard Wood (0075)	10,301	78.9	90.7	71.9	66.2		
Whiteman AFB (0076)	5,404	98.0	88.5	78.8	71.9		
Malmstrom AFB Clinic (0077)	5,022	100.0	84.6	85.2	80.3		
Offutt AFB (0078)	18,956	100.0	94.7	85.8	80.0		
Nellis AFB (0079)	25,269	93.9	83.5	92.6	70.3		
Kirtland AFB (0083)	16,857	100.0	89.1	90.1	87.5		
Holloman AFB (0084)	6,199	100.0	94.2	87.6	80.3		
Cannon AFB (0085)	5,132	100.0	96.6	81.4	78.2		
Grand Forks AFB (0093)	4,204	95.2	92.5	84.2	87.0		
Minot AFB (0094)	4,977	100.0	90.0	92.3	75.2		
Ellsworth AFB (0106)	5,983	93.5	92.9	77.4	85.7		
Ft. Bliss (0108)	26,335	85.8	90.7	75.7	79.8		
Hill AFB (0119)	13,630	100.0	92.3	84.7	80.0		
F.E. Warren AFB (0129)	5,454	100.0	94.3	77.3	89.9		
Buckley AFB Clinic (7200)	18,988	87.5	86.5	84.6	83.5		
Out/Area-Reg 8 (9908)	102,802	92.7	91.4	83.7	75.4		
Region 7/8 Overall	418,606	94.0	91.7	84.7	78.9		
MHS Average	3,013,030	96.0	91.2	85.5	80.3		

Population:

All female beneficiaries

Sample size: 6,852
Survey question: 24
What the exhibit shows:

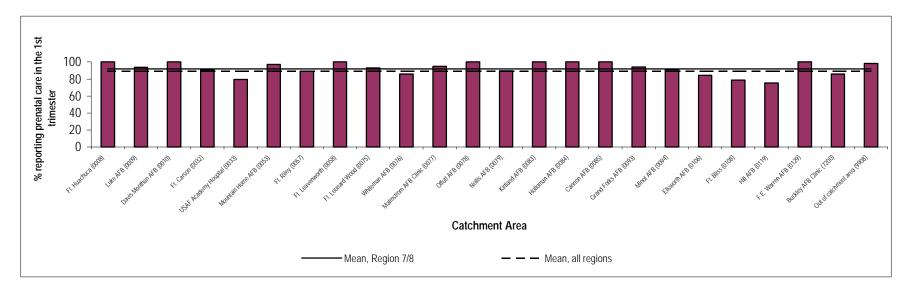
- Percentage of female beneficiaries who have had a Pap smear within three years of their survey response
- How the findings vary by enrollment status and type of enrollee
- How findings vary across catchment areas

Findings:

In Region 7/8, female beneficiaries who were enrolled in TRICARE Prime (92 to 94 percent) were more likely than their non-enrolled counterparts (79 to 85 percent) to have had a Pap smear in the past three years. All of these results exceed the Healthy People 2000 goal for adults (75 percent) and the civilian benchmark of 56 percent.

The sample of female active duty enrollees in Region 7/8 is too small to yield accurate estimates for individual catchment areas.

7.5 Timing of First Prenatal Care



Population:

Female beneficiaries who were pregnant when they responded to the survey or during the 12 preceding months

Sample size: 437

Vertical axis:

The percent of the sample who reported having received care for their pregnancy from a doctor or other health professional during the first trimester

Survey question: 29

What the exhibit shows:

- Percentage of pregnant beneficiaries who reported having received prenatal care at some point in the first trimester
- How findings vary across catchment areas

Findings:

Ninety-two percent of the female beneficiaries in Region 7/8 who were pregnant at some point during the year preceding the survey received prenatal care during the first trimester. This result exceeds both the Healthy People 2000 goal of 90 percent and the MHS average of 89 percent. In the civilian sector, between 76 and 84 percent of pregnant women receive prenatal care in the first trimester.

The sample of women who were pregnant at some point during the year preceding the survey is too small to yield accurate estimates for individual catchment areas. In many catchment areas, all of the women in the sample received prenatal care in the first trimester.

7.6 Percent of Male Beneficiaries Age 50 or Over in Each Catchment Area Who Had a Prostate Screening Within the Past Two Years, by Enrollment Status

		Enrollment Status					
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over		
Ft. Huachuca (0008)	3,242	0.0	69.0	62.9	80.5		
Luke AFB (0009)	19,268	33.3	70.7	77.4	91.1		
Davis Monthan AFB (0010)	9,972	0.0	76.8	84.0	89.1		
Ft. Carson (0032)	6,574	0.0	69.3	84.3	77.1		
USAF Academy Hosp (0033)	9,445	100.0	77.7	79.4	92.0		
Mountain Home AFB (0053)	1,021	100.0	73.7	58.6	78.4		
Ft. Riley (0057)	2,224	100.0	79.3	69.4	78.0		
Ft. Leavenworth (0058)	6,411	0.0	47.9	77.5	87.1		
Ft. Leonard Wood (0075)	2,833	0.0	68.8	47.2	74.3		
Whiteman AFB (0076)	1,662	0.0	74.1	73.3	77.6		
Malmstrom AFB Clinic (0077)	1,448	100.0	82.8	71.1	84.1		
Offutt AFB (0078)	6,084	50.0	71.0	77.9	82.2		
Nellis AFB (0079)	13,678	0.0	78.1	53.0	84.0		
Kirtland AFB (0083)	8,242	0.0	87.9	71.1	86.0		
Holloman AFB (0084)	1,597	0.0	84.3	59.5	79.9		
Cannon AFB (0085)	1,044	100.0	73.3	68.2	88.0		
Grand Forks AFB (0093)	644	0.0	74.6	67.1	88.8		
Minot AFB (0094)	573	0.0	72.2	66.8	75.5		
Ellsworth AFB (0106)	1,798	100.0	65.4	71.8	85.5		
Ft. Bliss (0108)	9,626	100.0	82.0	63.5	82.4		
Hill AFB (0119)	6,993	50.0	87.7	65.3	85.5		
F.E. Warren AFB (0129)	1,740	100.0	75.5	78.3	81.4		
Buckley AFB Clinic (7200)	12,521	75.0	70.0	69.9	90.0		
Out/Area-Reg 8 (9908)	82,206	70.2	63.8	61.8	83.4		
Region 7/8 Overall	210,845	70.3	73.0	66.4	85.1		
MHS Average	1,497,312	68.9	75.1	72.5	84.3		

Population:

Male beneficiaries age 50 or over

Sample size: 3,807

Survey question: 23

What the exhibit shows:

- Percentage of male beneficiaries age 50 or over who had a prostate screening within two years of their survey response
- How the findings vary by enrollment status and type of enrollee
- How findings vary across catchment areas

Findings:

In Region 7/8, between 66 and 85 percent of male beneficiaries age 50 or over had a prostate screening in the past two years. Men under age 65 and not enrolled in TRICARE Prime were the least likely to have had such a screening (66 percent), while non-enrollees age 65 or over were the most likely (85 percent). The American Cancer Society recommends an annual prostate exam for men age 50 or over.

The sample of male active duty enrollees age 50 or over is too small to yield accurate estimates for individual catchment areas. Among non-enrollees, the percentage of male beneficiaries age 50 or over who had a prostate screening in the past two years is highest at Luke AFB, Davis Monthan AFB, and USAF Academy Hospital. The percentage is lowest at Fort Leonard Wood, Holloman AFB, and Nellis AFB.

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Chapter

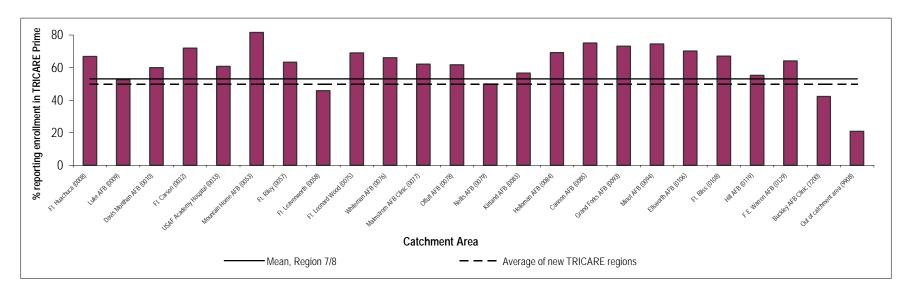
Enrollment and Beneficiary Health Status

This chapter presents findings on two key beneficiary characteristics – enrollment in TRICARE Prime and health status. Health status is based on a battery of 12 questions called the SF-12, which was developed by the Medical Center of New England under a grant from the Henry J. Kaiser Foundation. From the 12 questions, we computed two overall scores for each beneficiary – the composite physical health score and the composite mental health score. Only the former is reported here, and we compared the scores of MHS beneficiaries to the median score for the U.S population for six age groups (18-34, 35-44, 45-54, 55-64, 65-74, 75+). Here, we report on the percentage of beneficiaries whose composite physical health score is lower than the national median score for their age.

The key findings are:

- Of the beneficiaries in Region 7/8 who reported knowing at least a little about TRICARE, 53 percent are enrolled in TRICARE Prime. The level of enrollment in TRICARE Prime is lowest (21 to 46 percent) at Fort Leavenworth, Buckley AFB Clinic, and outside of Region 7/8 catchment areas. The level of enrollment is highest (75 to 82 percent) at Minot AFB, Cannon AFB, and Mountain Home AFB.
- In Region 7/8, between 45 and 57 percent of beneficiaries have a composite physical health score below the age-adjusted median score for the U.S. population. The result of 45 percent among active duty beneficiaries indicates that this group is somewhat healthier than civilians of the same age. Active duty enrollees at Fort Huachuca, Fort Bliss, and F.E. Warren AFB are less healthy than the average active duty enrollee in Region 7/8. In contrast, active duty enrollees at USAF Academy Hospital, Fort Leavenworth, Grand Forks AFB, Ellsworth AFB, and those outside of catchment areas are healthier than the average active duty enrollee.

8.1 Enrollment in TRICARE Prime



Population:

Beneficiaries who reported knowing at least a little about TRICARE

Sample size: 9,364

Vertical axis:

The percent of the sample enrolled in TRICARE Prime as of the time of their survey response

Survey question: 76

What the exhibit shows:

- The proportion of beneficiaries in each catchment area who are enrolled in TRICARE Prime
- How findings for catchment areas in Region 7/8 compare to the average for Region 7/8 and to the average for all new TRICARE regions

Findings:

Of the beneficiaries in Region 7/8 who reported knowing at least a little about TRICARE, 53 percent are enrolled in TRICARE Prime. This exceeds the level of enrollment in the average mature TRICARE region (50 percent). Mature TRICARE regions (6, 9, 10, 11, and 12) are those that began to implement TRICARE prior to April 1996.

The level of enrollment in TRICARE Prime is lowest (21 to 46 percent) at Fort Leavenworth, Buckley AFB Clinic, and outside of Region 7/8 catchment areas. The level of enrollment is highest (75 to 82 percent) at Minot AFB, Cannon AFB, and Mountain Home AFB.

8.2 Percent of Beneficiaries in Each Catchment Area With a Composite Physical Health Score Below the Median Score for the Age Group

		Enrollment Status				
Catchment Area	Population	Enrolled Active Duty	Enrolled Non-Active Duty	Not Enrolled Under Age 65	Not Enrolled Age 65 or Over	
Ft. Huachuca (0008)	18,940	58.5	58.3	54.0	57.3	
Luke AFB (0009)	61,619	43.2	53.8	49.8	53.5	
Davis Monthan AFB (0010)	36,737	41.0	51.1	46.0	48.3	
Ft. Carson (0032)	45,620	51.0	63.6	58.2	56.3	
USAF Academy Hosp (0033)	48,516	31.9	53.9	45.7	50.4	
Mountain Home AFB (0053)	9,670	50.7	59.3	50.0	57.8	
Ft. Riley (0057)	24,291	51.7	56.8	67.8	65.9	
Ft. Leavenworth (0058)	31,722	37.8	45.0	56.6	53.2	
Ft. Leonard Wood (0075)	25,968	41.8	62.9	57.4	63.5	
Whiteman AFB (0076)	10,397	48.0	62.0	56.2	53.2	
Malmstrom AFB Clinic (0077)	10,120	50.2	54.2	58.7	49.3	
Offutt AFB (0078)	35,177	48.1	48.8	47.9	44.5	
Nellis AFB (0079)	48,649	45.9	58.0	53.1	53.2	
Kirtland AFB (0083)	31,474	40.1	46.4	48.2	50.3	
Holloman AFB (0084)	11,978	47.0	60.7	56.6	54.3	
Cannon AFB (0085)	9,476	48.7	57.2	69.3	61.4	
Grand Forks AFB (0093)	8,969	38.4	61.4	46.3	56.4	
Minot AFB (0094)	9,492	42.0	55.2	66.2	52.1	
Ellsworth AFB (0106)	10,939	39.2	61.5	62.2	58.4	
Ft. Bliss (0108)	46,394	56.2	66.0	67.9	63.2	
Hill AFB (0119)	26,705	44.4	51.4	44.2	45.8	
F.E. Warren AFB (0129)	10,789	56.1	49.7	57.0	51.1	
Buckley AFB Clinic (7200)	36,428	44.6	63.6	55.5	53.2	
Out/Area-Reg 8 (9908)	218,007	39.9	61.8	52.0	51.4	
Region 7/8 Overall	828,078	45.1	57.3	52.7	52.6	
MHS Average	6,094,167	43.3	54.3	54.0	51.5	

Population:

All beneficiaries

Sample size: 13,539

Survey questions: 1-7

What the exhibit shows:

The proportion of beneficiaries in each catchment area whose composite physical health score falls below the

 median score for the age group
 How the findings vary by enrollment status and type of enrollee

Findings:

In Region 7/8, between 45 and 57 percent of beneficiaries have a composite physical health score below the age-adjusted median score for the U.S. population. A result near 50 percent means that, in terms of health status, beneficiaries in Region 7/8 are comparable to their counterparts in the civilian population. The result of 45 percent among active duty beneficiaries indicates that this group is somewhat healthier than civilians of the same age.

Active duty enrollees at Fort Huachuca, Fort Bliss, and F.E. Warren AFB tend to be less healthy than the average active duty enrollee in Region 7/8. In contrast, active duty enrollees at USAF Academy Hospital, Fort Leavenworth, Grand Forks AFB, Ellsworth AFB, and those outside of catchment areas tend to be healthier than the average active duty enrollee.

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Chapter

Performance Improvement Plan

This chapter contains a series of Performance Improvement Plans, one for each catchment area in Region 7/8. The purpose of each Performance Improvement Plan is to summarize the responses to numerous satisfaction questions in the HCSDB so that the patterns underlying these responses are more easily seen. These patterns help to identify key aspects of services or care that most influence beneficiary satisfaction in the catchment area.

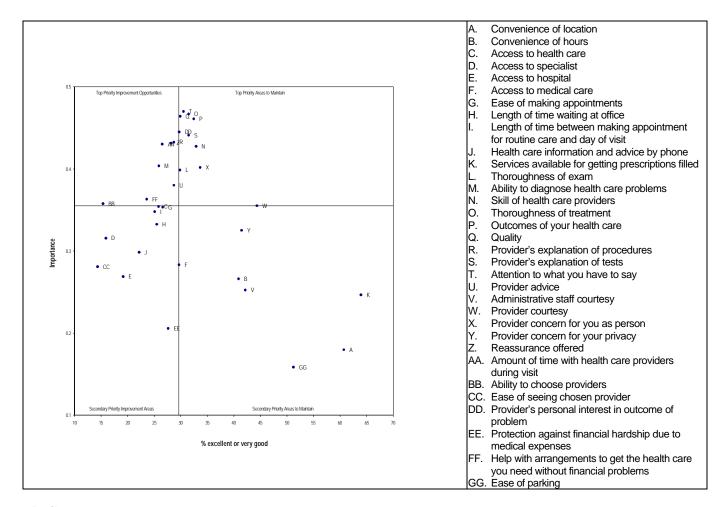
Each point in the Performance Improvement Plan represents one of the questions about satisfaction with military health care, Questions 52a-gg. For example, point H represents satisfaction with the length of time the beneficiary waits in the provider's office. The "importance" score in the figure is the correlation of overall satisfaction with ratings of these individual aspects of health care service. (A correlation was developed for each item.) For example, the correlation for office waiting time would indicate how "important" office waiting time is in determining the respondent's overall satisfaction with military care. Each specific aspect of health care, such as office waiting time, is a component of overall health care. Overall satisfaction with health care is a combination of the satisfaction ratings of individual components. The closer a point is to the top of the figure, the more important that component is in determining overall satisfaction with military health care.

The intersection of a service's importance and satisfaction value defines a point on the grid. The middle values of importance and satisfaction determine the lines that divide the grid into four priority quadrants. Services above the horizontal line are of greater importance to the beneficiary than those below the horizontal line, and they are noteworthy for their contribution to overall satisfaction. Services that beneficiaries are less satisfied with lie to the left of the vertical line, and those they are more satisfied with lie to the right of the line.

The quadrants may be interpreted as follows:

- Top priority improvement opportunities are in the top left quadrant. These are specific aspects of health care with which beneficiaries are relatively dissatisfied and, at the same time, are important in determining overall satisfaction. These are the areas that offer the greatest opportunities for increasing overall beneficiary satisfaction.
- Top priority areas to maintain are in the top right quadrant. These are aspects of health care with which beneficiaries are relatively satisfied and that are important in determining overall satisfaction. These are current strengths of the catchment area.
- Secondary priority improvement opportunities are in the bottom left quadrant. Low importance in determining overall satisfaction and low beneficiary satisfaction characterize these aspects of health care. There may be a need for improvement, but these are lower priority items.
- Secondary priority areas to maintain are in the bottom right quadrant. These aspects of health care are characterized by low importance in determining overall satisfaction and high beneficiary satisfaction. These areas appear to be meeting beneficiaries' expectations.

Figure 9.1 Performance Improvement Plan for Ft. Huachuca (0008)



The following aspects of military health care at Fort Huachuca were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Quality of Care

- Ability to diagnose your health care problems (M)
- Provider's explanation of health care procedures (R)

Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

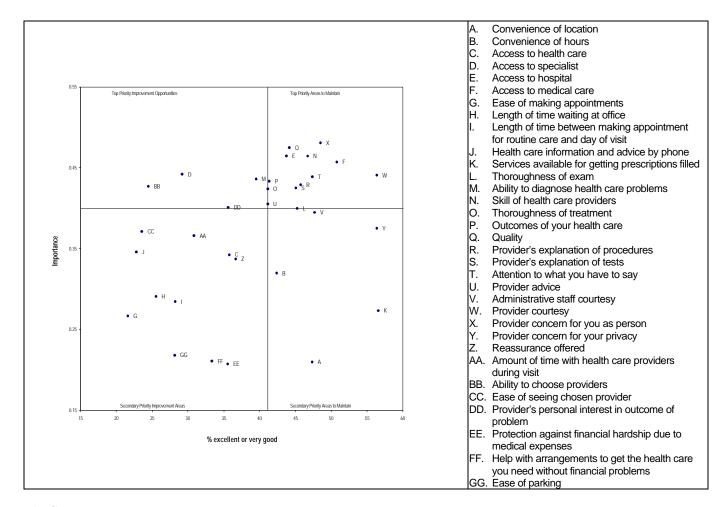
Choice and Continuity of Care

Ability to choose health care providers (BB)

Finances

Help with arrangements to get the health care you need without financial problems (FF)

Figure 9.2 Performance Improvement Plan for Luke AFB (0009)



The following aspects of military health care at Luke AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

Access to a specialist if you need one (D)

Quality of Care

- Ability to diagnose your health care problems (M)
- Thoroughness of treatment (O)

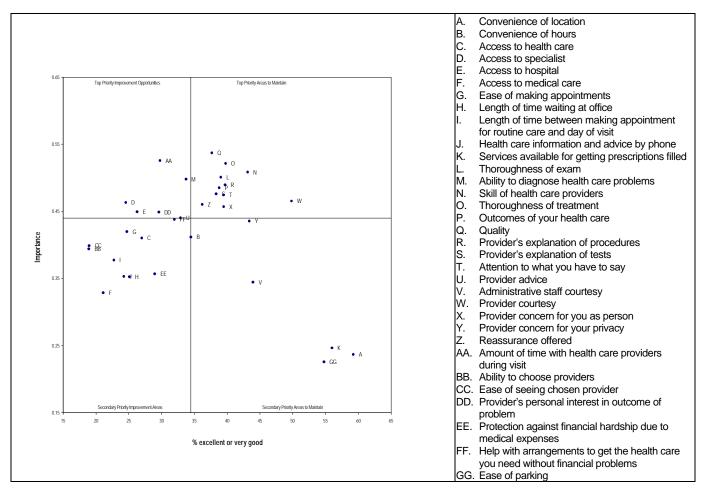
Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Health care providers' personal interest in the outcome of your problem (DD)

Choice and Continuity of Care

Ability to choose health care providers (BB)

Figure 9.3 Performance Improvement Plan for Davis Monthan AFB (0010)



The following aspects of military health care at Davis Monthan AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to a specialist if you need one (D)
- Access to hospital care if you need it (E)

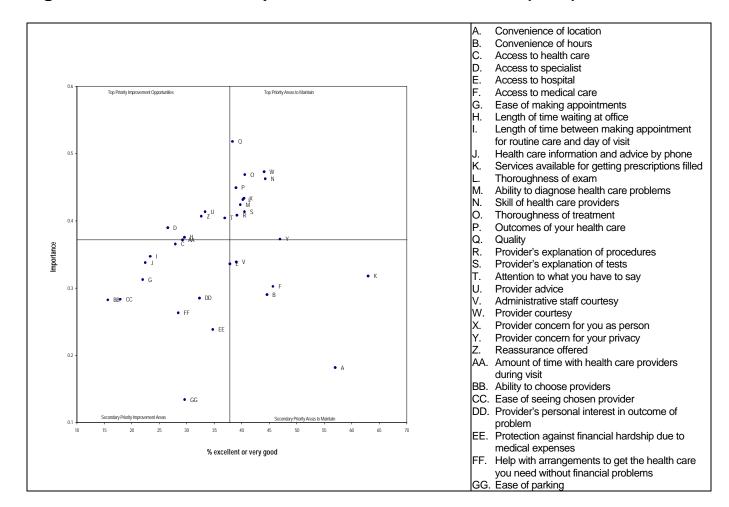
Quality of Care

Ability to diagnose your health care problems (M)

Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Figure 9.4 Performance Improvement Plan for Ft. Carson (0032)



The following aspects of military health care at Fort Carson were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into two categories, should be the focus of remedial action.

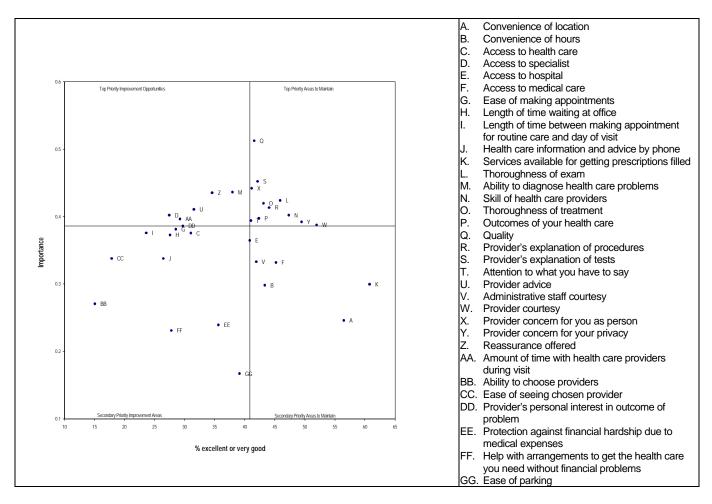
Access to System Resources and Appointments

- Access to a specialist if you need one (D)
- Length of time you wait at office to see the provider (H)

Concern Shown by Health Care Providers

- Attention provider gives to what you say (T)
- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)

Figure 9.5 Performance Improvement Plan for USAF Academy Hospital (0033)



The following aspects of military health care at USAF Academy Hospital were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

Access to a specialist if you need one (D)

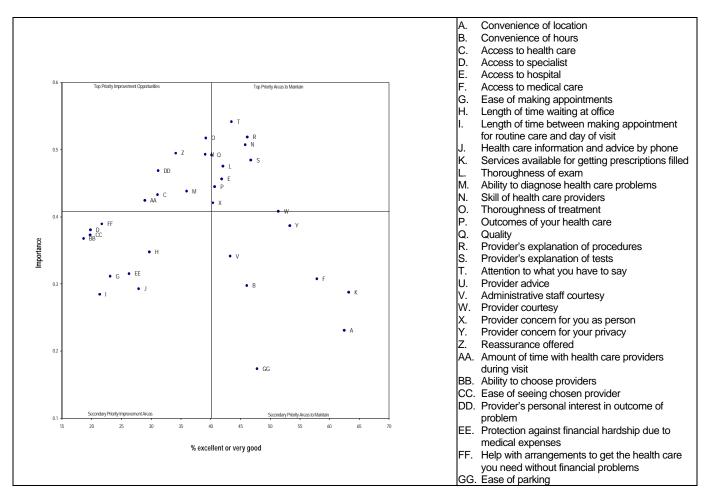
Quality of Care

Ability to diagnose your health care problems (M)

Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Figure 9.6 Performance Improvement Plan for Mountain Home AFB (0053)



The following aspects of military health care at Mountain Home AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

Access to health care whenever you need it (C)

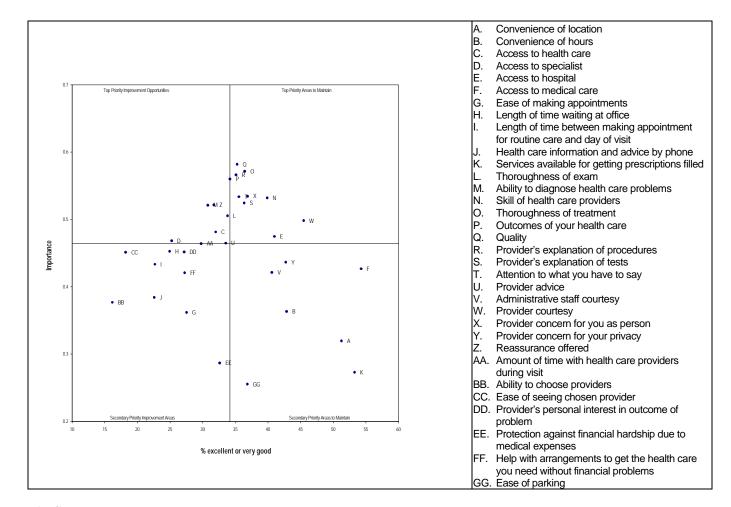
Quality of Care

- Ability to diagnose your health care problems (M)
- Thoroughness of treatment (O)
- Overall quality of health care (Q)

Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Figure 9.7 Performance Improvement Plan for Ft. Riley (0057)



The following aspects of military health care at Fort Riley were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)

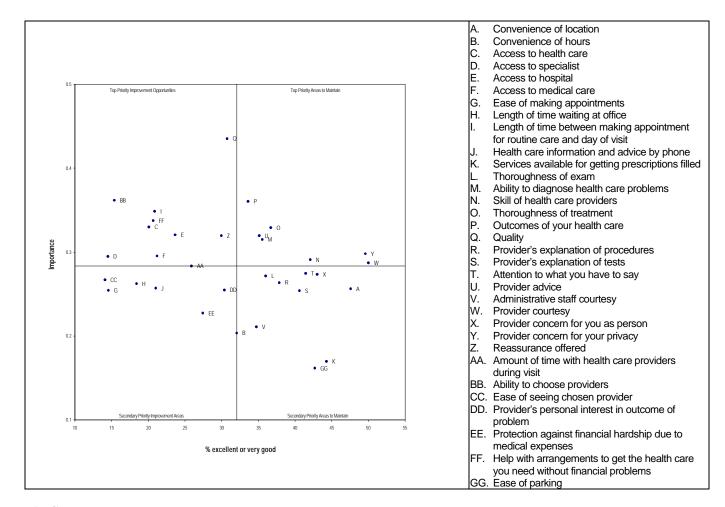
Quality of Care

- Thoroughness of examination (L)
- Ability to diagnose your health care problems (M)
- The outcomes of your health care (how much you are helped) (P)

Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)

Figure 9.8 Performance Improvement Plan for Ft. Leavenworth (0058)



The following aspects of military health care at Fort Leavenworth were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into five categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)
- Access to hospital care if you need it (E)
- Access to medical care in an emergency (F)
- Length of time between making an appointment for routine care and the day of your visit (I)

Quality of Care

Overall quality of health care (Q)

Concern Shown by Health Care Providers

- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)

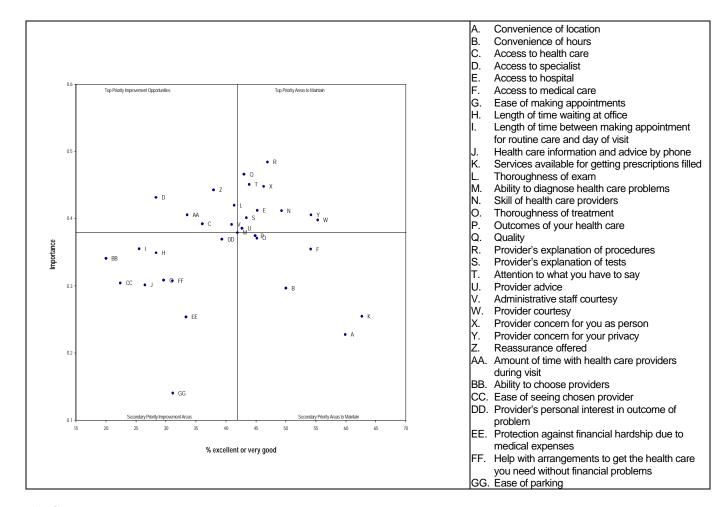
Choice and Continuity of Care

Ability to choose health care providers (BB)

Finances

Help with arrangements to get the health care you need without financial problems (FF)

Figure 9.9 Performance Improvement Plan for Ft. Leonard Wood (0075)



The following aspects of military health care at Fort Leonard Wood were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)

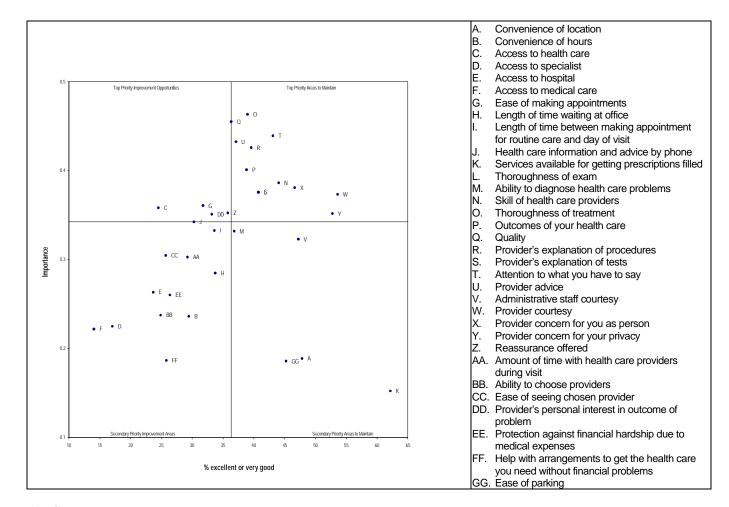
Quality of Care

- Thoroughness of examination (L)
- Ability to diagnose your health care problems (M)

Concern Shown by Health Care Providers

- Courtesy shown to you by administrative staff (e.g. receptionists) (V)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)

Figure 9.10 Performance Improvement Plan for Whiteman AFB (0076)



The following aspects of military health care at Whiteman AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Ease of making appointments for health care by phone (G)
- Availability of health care information and advice by phone (J)

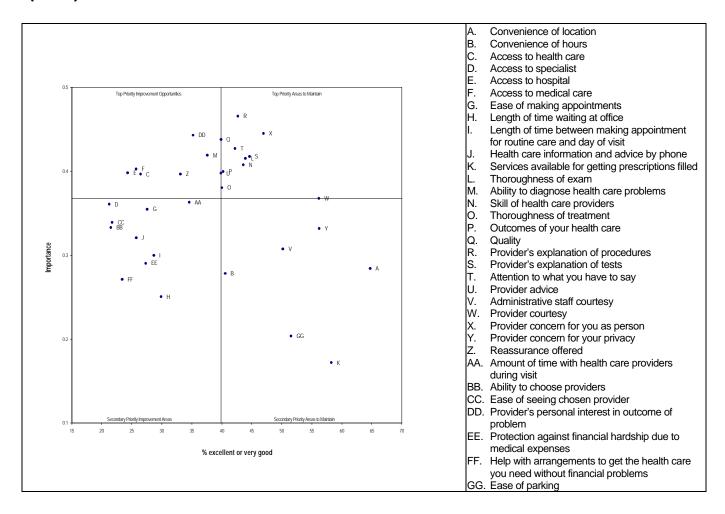
Quality of Care

Overall quality of health care (Q)

Concern Shown by Health Care Providers

- Reassurance and support offered to you by health care providers (Z)
- Health care providers' personal interest in the outcome of your problem (DD)

Figure 9.11 Performance Improvement Plan for Malmstrom AFB Clinic (0077)



The following aspects of military health care at Malmstrom AFB Clinic were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to hospital care if you need it (E)
- Access to medical care in an emergency (F)

Quality of Care

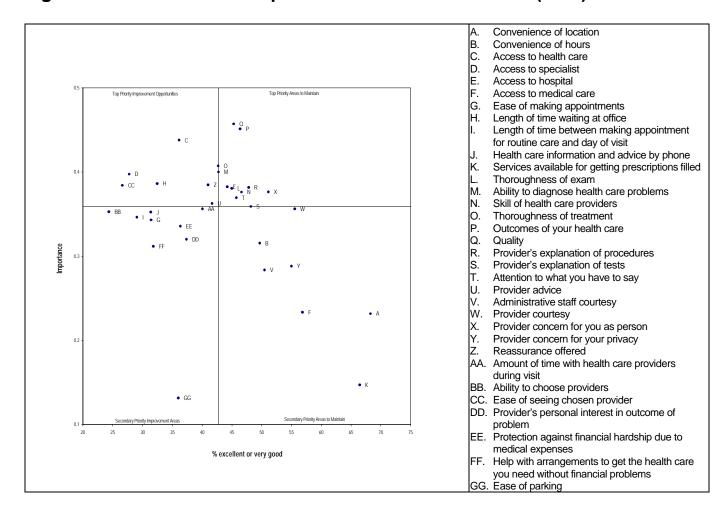
- Ability to diagnose your health care problems (M)
- Overall quality of health care (Q)

Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Health care providers' personal interest in the outcome of your problem (DD)

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Figure 9.12 Performance Improvement Plan for Offutt AFB (0078)



The following aspects of military health care at Offutt AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)
- Length of time you wait at office to see the provider (H)

Quality of Care

- Ability to diagnose your health care problems (M)
- Thoroughness of treatment (O)

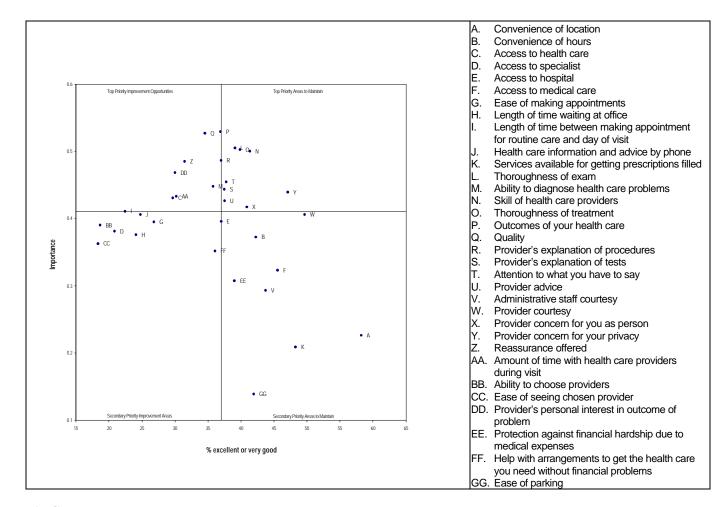
Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)

Choice and Continuity of Care

Ease of seeing the provider of your choice (CC)

Figure 9.13 Performance Improvement Plan for Nellis AFB (0079)



The following aspects of military health care at Nellis AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Length of time between making an appointment for routine care and the day of your visit (I)

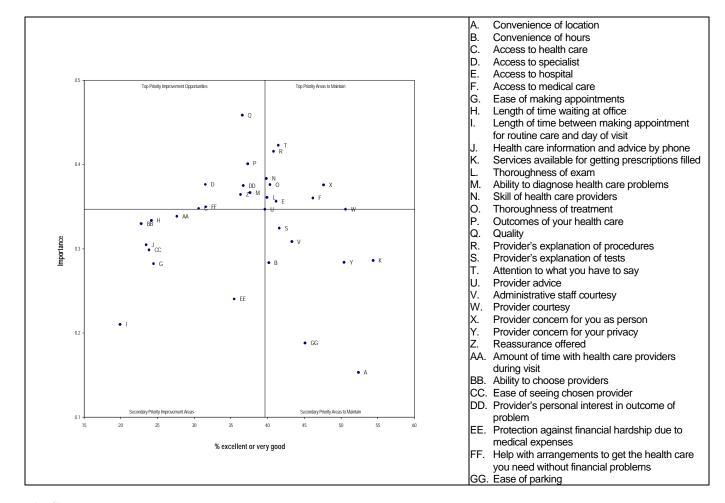
Quality of Care

- Ability to diagnose your health care problems (M)
- The outcomes of your health care (how much you are helped) (P)
- Overall quality of health care (Q)
- Provider's explanation of health care procedures (R)

Concern Shown by Health Care Providers

- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Figure 9.14 Performance Improvement Plan for Kirtland AFB (0083)



The following aspects of military health care at Kirtland AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)

Quality of Care

- Ability to diagnose your health care problems (M)
- The outcomes of your health care (how much you are helped) (P)
- Overall quality of health care (Q)

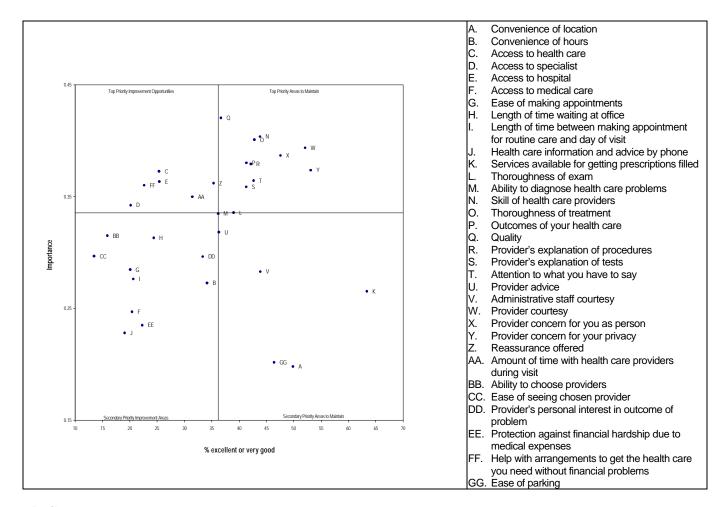
Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Health care providers' personal interest in the outcome of your problem (DD)

Finances

Help with arrangements to get the health care you need without financial problems (FF)

Figure 9.15 Performance Improvement Plan for Holloman AFB (0084)



The following aspects of military health care at Holloman AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)
- Access to hospital care if you need it (E)

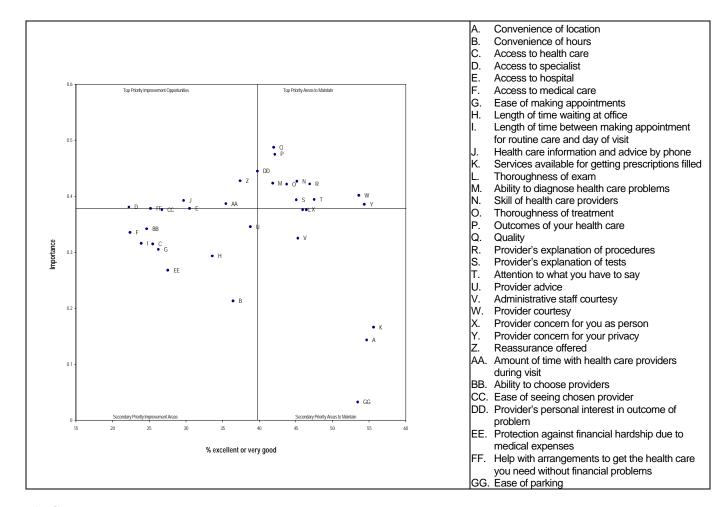
Concern Shown by Health Care Providers

- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)

Finances

Help with arrangements to get the health care you need without financial problems (FF)

Figure 9.16 Performance Improvement Plan for Cannon AFB (0085)



The following aspects of military health care at Cannon AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to a specialist if you need one (D)
- Access to hospital care if you need it (E)
- Availability of health care information or advice by phone (J)

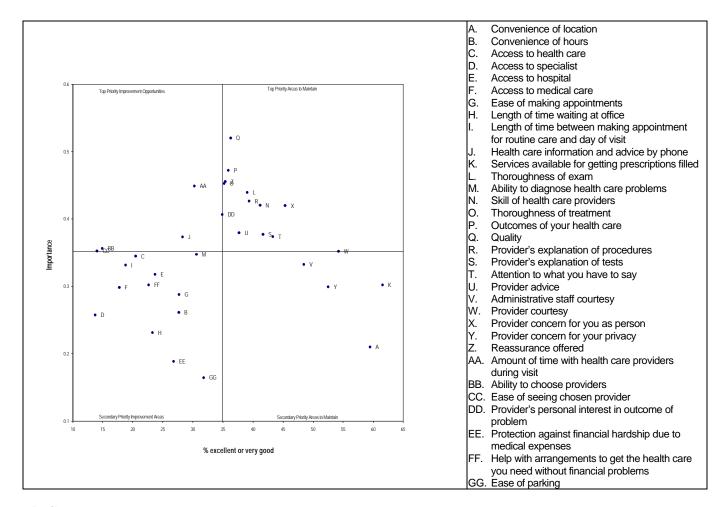
Concern Shown by Health Care Providers

- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Finances

Help with arrangements to get the health care you need without financial problems (FF)

Figure 9.17 Performance Improvement Plan for Grand Forks AFB (0093)



The following aspects of military health care at Grand Folks AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

Availability of health care information or advice by phone (J)

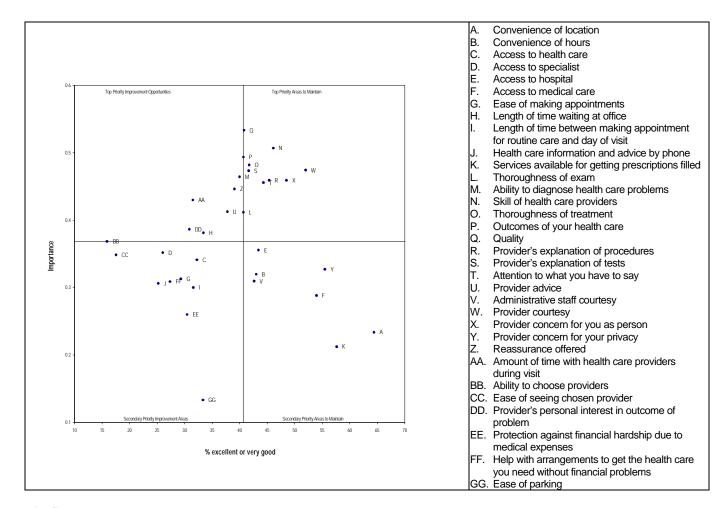
Concern Shown by Health Care Providers

- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Choice and Continuity of Care

- Ability to choose health care providers (BB)
- Ease of seeing the provider of your choice (CC)

Figure 9.18 Performance Improvement Plan for Minot AFB (0094)



The following aspects of military health care at Minot AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

Length of time you wait at office to see the provider (H)

Quality of Care

- Thoroughness of examination (L)
- Ability to diagnose your health care problems (M)
- The outcomes of your health care (how much you are helped) (P)

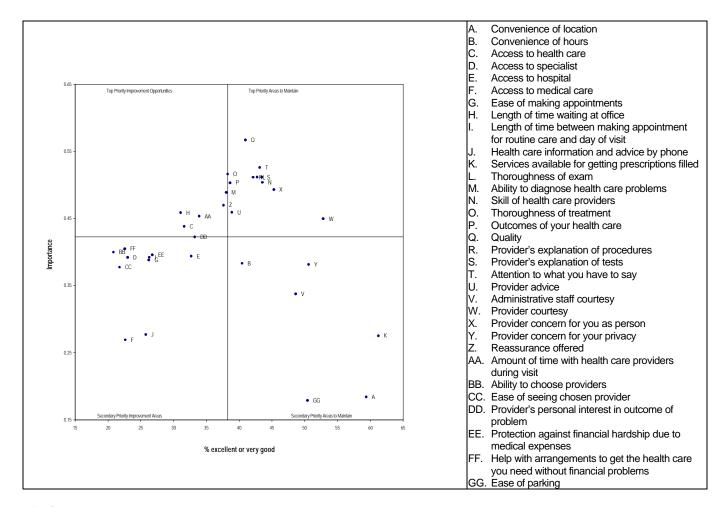
Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Choice and Continuity of Care

Ability to choose health care providers (BB)

Figure 9.19 Performance Improvement Plan for Ellsworth AFB (0106)



The following aspects of military health care at Ellsworth AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into three categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Length of time you wait at office to see the provider (H)

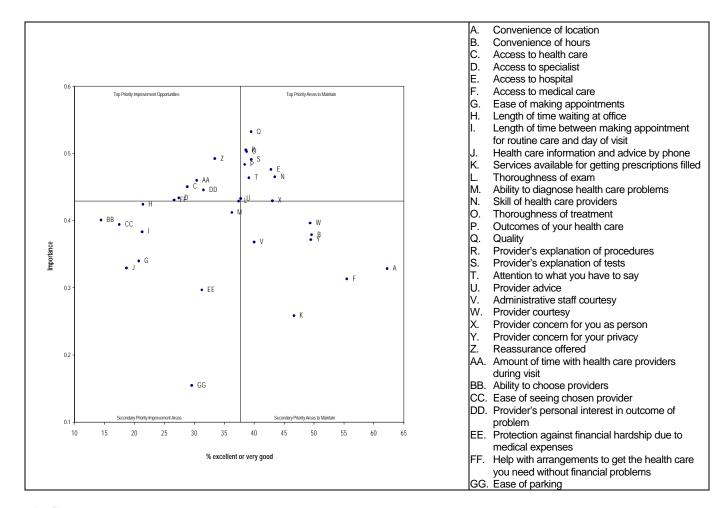
Quality of Care

- Ability to diagnose your health care problems (M)
- Thoroughness of treatment (O)

Concern Shown by Health Care Providers

- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Figure 9.20 Performance Improvement Plan for Ft. Bliss (0108)



The following aspects of military health care at Fort Bliss were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)

Quality of Care

Thoroughness of examination (L)

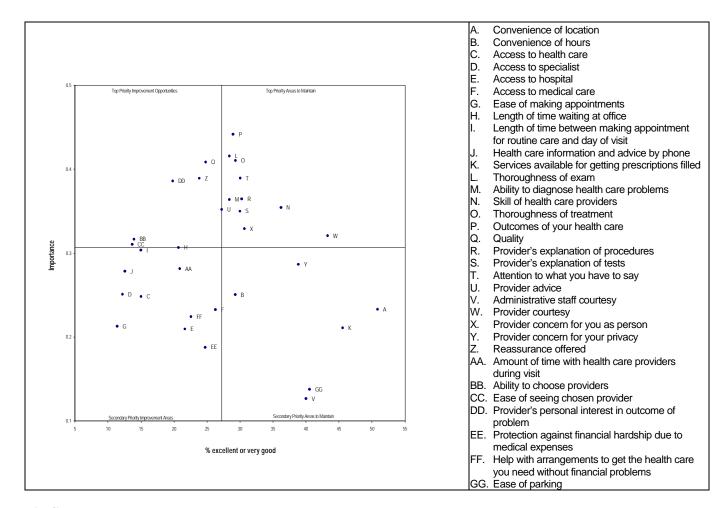
Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Amount of time spent with health care providers during a visit (AA)
- Health care providers' personal interest in the outcome of your problem (DD)

Finances

Help with arrangements to get the health care you need without financial problems (FF)

Figure 9.21 Performance Improvement Plan for Hill AFB (0119)



The following aspects of military health care at Hill AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

Length of time you wait at office to see the provider (H)

Quality of Care

Overall quality of health care (Q)

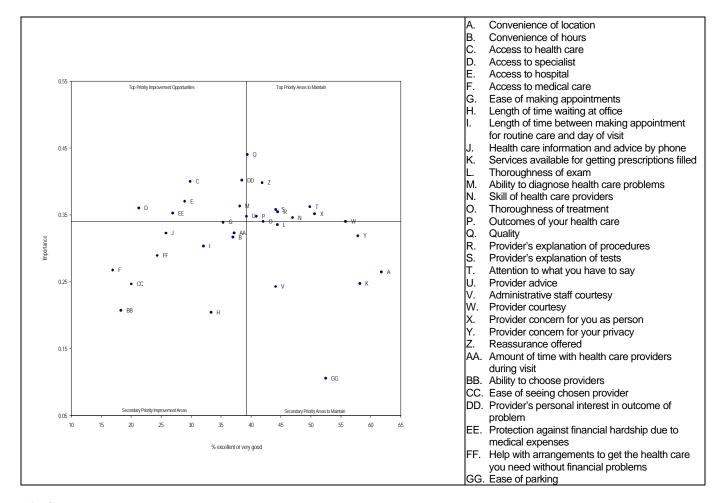
Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Reassurance and support offered to you by health care providers (Z)
- Health care providers' personal interest in the outcome of your problem (DD)

Choice and Continuity of Care

- Ability to choose health care providers (BB)
- Ease of seeing the provider of your choice (CC)

Figure 9.22 Performance Improvement Plan for F.E. Warren AFB (0129)



The following aspects of military health care at F.E. Warren AFB were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

- Access to health care whenever you need it (C)
- Access to a specialist if you need one (D)
- Access to hospital care if you need it (E)

Quality of Care

Ability to diagnose your health care problems (M)

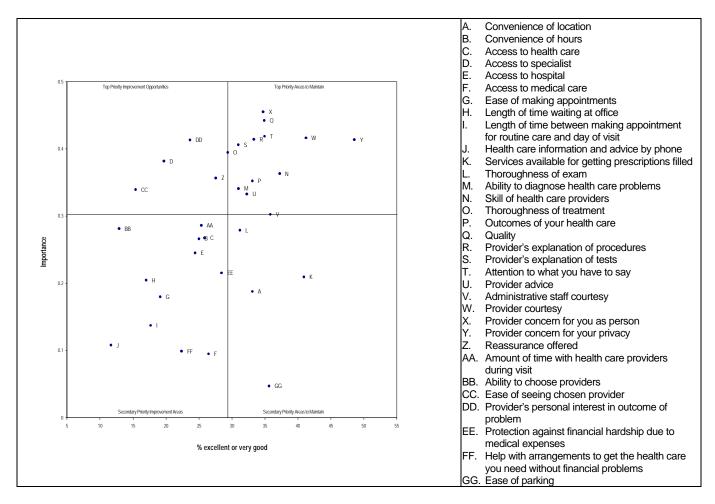
Concern Shown by Health Care Providers

- Advice provider gives you about ways to avoid illness and stay healthy (U)
- Health care providers' personal interest in the outcome of your problem (DD)

Finances

Protection you have against financial hardship due to medical expenses (EE)

Figure 9.23 Performance Improvement Plan for Buckley AFB Clinic (7200)



The following aspects of military health care at Buckley AFB Clinic were important to overall beneficiary satisfaction with care but received relatively low satisfaction scores. These aspects of care, which fall into four categories, should be the focus of remedial action.

Access to System Resources and Appointments

Access to a specialist if you need one (D)

Quality of Care

■ Thoroughness of treatment (O)

Concern Shown by Health Care Providers

- Reassurance and support offered to you by health care providers (Z)
- Health care providers' personal interest in the outcome of your problem (DD)

Choice and Continuity of Care

Ease of seeing the provider of your choice (CC)